Case 16-24749 Doc 1 Filed 08/02/16 Entered 08/02/16 06:32:48 Desc Main Document **₽**age 1 of 69 Fill in this information to identify your case: United States Bankruptcy Court for the: Northern District of: Illinois Case number (if known) Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Check if this is an Chapter 13 amended filing Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy 12/15 The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case —and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself   |                            |   |
|---|----------------------------|---|
|   | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your full name   | Clarence                   |   |
|   | First name                 | First name                                    |
| Write the name that is on   |                            |   |
| your government-issued<br>picture identification (for               | Middle name                | Middle name                                   |
| example, your driver's  | Robinson                   |   |
| license or passport   | Last name                  | Last name                                     |
| Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| 2. All other names you  |                            |   |
| have used in the last<br>8 years                                    | First name                 | First name                                    |
| Include your married or   | Middle name                | Middle name                                   |
| maiden names.   | Last name                  | Last name                                     |
|   | First name                 | First name                                    |
|   | Middle name                | Middle name                                   |
|   | Last name                  | Last name                                     |
| 3. Only the last 4 digits of your Social                            | XXX - XX- <u>7069</u>      |   |
| Security number or  | OR                         | OR  |
| federal Individual<br>Taxpayer<br>Identification                    | 9 xx - xx-                 | 9 xx - xx-                                    |
| number (ITIN)   |                            |   |

Clarence ase 16-24749 Doc 1 Filed 08#02/\s16 Entered 08/02/16/06:32:48 Desc Main Debtor 1 Page 2 of 69 Document Procure Procu **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer Identification Business name Business name Numbers (EIN) you have used in the last 8 years Business name Business name Include trade names and EIN EIN doing business as names EIN EIN 5. Where you live If Debtor 2 lives at a different address: 4542 Half Moon Drive # A Number Street Number Street Yorkville 60560 Illinois City State Zip Code City State Zip Code Kendall County County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from yours, fill it in it in here. Note that the court will send any notices to you at this here. Note that the court will send any notices to this mailing mailing address. address. Number Street Number Street City State Zip Code City State Zip Code 6. Why you are Check one: Check one: choosing this district to file for Over the last 180 days before filing this petition, I have lived Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. in this district longer than in any other district. bankruptcy I have another reason. Explain. (See 28 U.S.C. §§ 1408.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

Debtor 1 Claren Case 16-24749 Doc 1 Filed 08/02/416 Entered 08/02/416 (06:32:48 Desc Main

Page 3 of 69 Document of the Document of th Tell the Court About Your Bankruptcy Case Part 2: 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form **Bankruptcy Code** B2010)). Also, go to the top of page 1 and check the appropriate box. you are choosing to Chapter 7 file under Chapter 11 Chapter 12 Chapter 13 8. How you will pay the ☑ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local fee court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order... If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for □ No. bankruptcy within the last 8 years? Yes. District Northern District of Illinois When Case number 14-21935 MM / DD / YYYY Northern District of Illinois When 2/25/2011 District 11-07638 Case number MM / DD / YYYY District Northern District of Illinois When 11/5/2012 Case number 12-43981 MM / DD / YYYY 10. Are any bankruptcy ✓ No. cases pending or Yes, Debtor being filed by a Relationship to you spouse who is not When District Case number, if known filing this case with MM / DD / YY you, or by a Debtor Relationship to you business partner, or When District Case number, if known by an affiliate? 11. Do you rent your ✓ No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ✓ No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with

this bankruptcy petition.

Page 4 of 69 Document of the Document of th Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole ◪ No. Go to Part 4. proprietor of any full- or part-time Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. Chapter 11 of the If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow **Bankruptcy Code** statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). and are you a small business debtor? No. I am not filing under Chapter 11. For a definition of No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the small business debtor, Bankruptcy Code. see 11 U.S.C. § Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. 101(51D). Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have  $\overline{\phantom{a}}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Number Street that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

Clarence ase 16-24749

Debtor 1

Doc 1

Filed 08/02/16

Entered 08/02/16/06:32:48 Desc Main

Debtor 1 Claren Case 16-24749 Doc 1 Filed 08/02/616 Entered 08/02/616 06:32:48 Desc Main

Name Middle Name

Document Page 5 of 69

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

You must check one:

#### 15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

# About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case):

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes me to be

unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to

do so.

Active duty. I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in

person, by phone, or through the internet, even after I reasonably tried to

do so.

Active duty. I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Clarence ase 16-24749 Doc 1 Filed 08#02/s16 Entered 08/02/16/06:32:48 Desc Main Debtor 1 Page 6 of 69 Document Document **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded No. and administrative Yes. expenses are paid that funds will be available for distribution to unsecured creditors? **√** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 5,001-10,000 50,001-100,000 50-99 do you estimate that 10,001-25,000 More than 100,000 you owe? 100-199 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your **✓** \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. x /s/ Clarence Robinson Signature of Debtor 2 Signature of Debtor 1 Executed on 8/2/2016 Executed on MM / DD / YYYY MM / DD / YYYY

Debtor 1 Claren Case 16-24749 Doc 1 Filed 08/02/s16 Entered 08/02/s16 (06:32:48 Desc Main Documents) Page 7 of 69

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| rect.                            |       |      |                            |  |
|----------------------------------|-------|------|----------------------------|--|
| Signature of Attorney for Debtor |       | Date | 8/2/2016<br>MM / DD / YYYY |  |
| Printed name                     |       |      |                            |  |
| Semrad Law Firm                  |       |      |                            |  |
| Firm name                        |       |      |                            |  |
| Street                           |       |      |                            |  |
| City                             | State |      | Zip Code                   |  |
| Contact phone                    |       | E    | mail address               |  |
| Bar number                       |       |      | tate                       |  |

Case 16-24749 Doc 1 Filed 08/02/16 Entered 08/02/16 06:32:48 Desc Main

| Fill in this information to identify your case: |                           |             |                             |  |  |  |  |
|---|---------------------------|-------------|-----------------------------|--|--|--|--|
| Debtor 1  | Clarence                  |             | Robinson                    |  |  |  |  |
|   | First Name                | Middle Name | Last Name                   |  |  |  |  |
| Debtor 2  |                           |             |                             |  |  |  |  |
| (Spouse, if filing                              | g) First Name             | Middle Name | Last Name                   |  |  |  |  |
| United States                                   | Bankruptcy Court for the: | Northern    | District of Illinois(State) |  |  |  |  |
| Case number (If known)                          |                           |             | (State)                     |  |  |  |  |

Check if this is an amended filing

## Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct

| information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended syour original forms, you must fill out a new Summary and check the box at the top of this page.  | schedules after you file                    |
|--|---|
| Part 1: Summarize Your Assets  |   |
|  | <b>Your assets</b><br>Value of what you own |
| Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$159,145.00                                |
| 1b. Copy line 62, Total personal property, from Schedule A/B   | \$79,234.00                                 |
| 1c. Copy line 63, Total of all property on Schedule A/B  | \$238,379.00                                |
| Part 2: Summarize Your Liabilities   |   |
|  | Your liabilities<br>Amount you owe          |
| <ol> <li>Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)</li> <li>Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D</li> </ol> | \$202,984.91                                |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F  | \$9,800.00                                  |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$8,023.99                                  |
| Your total liabilities   | \$220,808.90                                |
| Part 3: Summarize Your Income and Expenses   |   |
| 4. Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I  | \$4,288.20                                  |
| Schedule J: Your Expenses (Official Form 106J)  Copy your monthly expenses from line 22, Column A, of Schedule J   | \$3,588.00                                  |
|  |   |

Debtor 1 Clarend ase 16-24749 Doc 1 Filed 08/02/16 Entered 08/02/16 /06i32:48 Desc Main

Page 9 of 69 **Answer These Questions for Administrative and Statistical Records** Part 4: 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$1,287.00 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$9,800.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00

\$9,800.00

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9g. Total. Add lines 9a through 9f.

Case 16-24749 Doc 1 Filed 08/02/16 Entered 08/02/16 06:32:48 Desc Main Fill in this information to identify your case: Debtor 1 Clarence Robinson First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an Official Form 106A/B amended filing Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2 Yes. Where is the property? What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: 1.1 Single-family home Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building 4542 Half Moon Drive # A Current value of the Current value of the Number Condominium or cooperative portion you own? \$159145.00 entire property? Manufactured or mobile home \$159145.00 Yorkville Illi<u>nois</u> 60560 Zip Code Describe the nature of your ownership City State Investment property interest (such as fee simple, tenancy by Timeshare Kendall the entireties, or a life estate), if known. County Other Check if this is community property Who has an interest in the property? Check one. (see instructions) Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: If you own or have more than one. list here: What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: 1.2 Single-family home Street address, if available, or other description Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Current value of the Current value of the Condominium or cooperative entire property? portion you own? Manufactured or mobile home Land Number Street Describe the nature of your ownership Investment property interest (such as fee simple, tenancy by Timeshare the entireties, or a life estate), if known. City State Zip Code Check if this is community property Who has an interest in the property? Check one. (see instructions) Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only

property identification number:

At least one of the debtors and another

Other information you wish to add about this item, such as local

|  |   | 749 <u>Doc 1</u>                             | Filed 08/02/16 Entered 08/02/16  | 6 /06 ର 32: <u>48 Desc Main</u>   |
|--|---|--|--|---|
| 1.3  | First Name eet address, if available, or c  | Middle Name Other description                | Documetinate Page 11 of 69  What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building  Condominium or cooperative | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D:  Creditors Who Have Claims Secured by Property.  Current value of the entire property?  Current volue of the portion you own? |
| Nui<br>City  | mber Street / State   | Zip Code                                     | Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one.                                   | Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.  Check if this is community property  |
|  |   |  | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another   | (see instructions)  |
|  |   |  | Other information you wish to add about this item, property identification number:  all of your entries from Part 1, including any entries re          | for pages \$159145.00   |
| Part 2:  | Describe Your Vehic   | les  |  |   |
| <b>Do you o</b><br>you own th                            | wn, lease, or have legal or<br>nat someone else drives. If yo<br>ans, trucks, tractors, sport ut<br>o | equitable interest<br>ou lease a vehicle, al | in any vehicles, whether they are registered or not? I<br>lso report it on Schedule G: Executory Contracts and Unex<br>cycles                          |   |
| Do you or<br>you own th<br>3. Cars, va<br>\textsquare No | wn, lease, or have legal or<br>nat someone else drives. If yo<br>ans, trucks, tractors, sport ut<br>o | equitable interest<br>ou lease a vehicle, al | lso report it on Schedule G: Executory Contracts and Unex  |   |

| Debtor 1 |  | Filed 08/02/16 Entered 08/02/14  | 6/06/32: <u>48 Des</u>  | <u>c Main</u>   |
|----------|--|--|---|---|
|          | First Name Middle Name                               | Document Page 12 of 69   |   |   |
| 3.3      | Make Model:  | Who has an interest in the property? Check one.  | Do not deduct secured cl<br>the amount of any secure                                  |   |
|          | Year:  | Debtor 1 only  | •   | ims Secured by Property.  |
|          | Approximate mileage:                                 |  | Crounters Tring Flavo Gla   | e decarda by 1 reporty.   |
|          |  | Debtor 2 only  | Current value of the  | Current value of the  |
|          | Other information:                                   | Debtor 1 and Debtor 2 only   | entire property?  | portion you own?  |
|          |  | At least one of the debtors and another  | ·   |   |
|          |  | Check if this is community property (see instructions)   |   |   |
| 3.4      |  | Who has an interest in the property? Check   | Do not deduct secured cl  | •   |
|          | Model:   | one.   | the amount of any secure  |   |
|          | Year:  | Debtor 1 only  | Creditors Who Have Cla  | ims Secured by Property.  |
|          | Approximate mileage:                                 | Debtor 2 only  | Current value of the  | Current value of the  |
|          | Other information:                                   | Debtor 1 and Debtor 2 only   | entire property?  | portion you own?  |
|          |  | At least one of the debtors and another  | -   |   |
|          |  | Check if this is community property (see instructions)   |   |   |
|          | Yes  | Who has an interest in the premarks? Cheek   | Do not dodust occursed al   | oima ar avamntiana Dut  |
| 4.1      | Make   | Who has an interest in the property? Check   | Do not deduct secured cl  | aims or exemptions. Put   |
|          | Model:   | one.   | the amount of any secure  |   |
|          | Year:  | Debtor 1 only  | Creditors Who Have Cla  | ims Secured by Property.  |
|          | Approximate mileage:                                 | Debtor 2 only  | Current value of the  | Current value of the  |
|          | Other information:                                   | Debtor 1 and Debtor 2 only   | entire property?  | portion you own?  |
|          |  | At least one of the debtors and another  | -   |   |
|          |  | Check if this is community property (see instructions)   |   |   |
| 4.0      |  |  |   |   |
| 4.2      | Make   | Who has an interest in the property? Check   | Do not deduct secured cl  | aims or exemptions. Put   |
| 4.2      | Make<br>Model:                                       | ,  | Do not deduct secured cl<br>the amount of any secure                                  | •   |
| 4.2      | Model: Year:   | Who has an interest in the property? Check   | the amount of any secure  | •   |
| 4.2      | Model:   | Who has an interest in the property? Check one.  | the amount of any secure<br>Creditors Who Have Cla                                    | d claims on Schedule D:<br>ims Secured by Property.                       |
| 4.2      | Model: Year:   | Who has an interest in the property? Check one.  Debtor 1 only   | the amount of any secure  | d claims on <i>Schedule D:</i>  |
| 4.2      | Model: Year: Approximate mileage:                    | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only   | the amount of any secure<br>Creditors Who Have Cla<br>Current value of the            | d claims on Schedule D:<br>ims Secured by Property.  Current value of the |
| 4.2      | Model: Year: Approximate mileage:                    | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only  | the amount of any secure<br>Creditors Who Have Cla<br>Current value of the            | d claims on Schedule D:<br>ims Secured by Property.  Current value of the |
|          | Model: Year: Approximate mileage: Other information: | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | the amount of any secure Creditors Who Have Cla Current value of the entire property? | d claims on Schedule D:<br>ims Secured by Property.  Current value of the |

Debtor 1 Claren Case 16-24749 Doc 1 Filed 08/02/s16 Entered 08/02/s16 (06:32:48 Desc Main

| Docume Name | Docume

**Describe Your Personal and Household Items** Part 3: Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware П No ✓ Yes. Describe... Misc. household goods and furniture \$550.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Nο Yes. Describe... Television, Computer \$500.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles **V** No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments **✓** No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... Used men's clothing \$350.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... Costume Jewelry \$200.00 13. Non-farm animals Examples: Dogs, cats, birds, horses **✓** No Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2850.00 for Part 3. Write that number here

Debtor 1 Clarence ase 16-24749 Doc 1 Filed 08/02/\$16 Entered 08/02/\$16 (06:32:48 Desc Main Pirst Name Documentum Page 14 of 69

**Describe Your Financial Assets** 

Part 4:

| Do  | you own or have a                          | ny legal or equitable inte                                    | rest in any of the following   | g?                                      | Current value of the portion you own?  Do not deduct secured claims or exemptions. |
|-----|--|---|--|---|--|
|     | <b>☑</b> No                                | in your wallet, in your home, in a sa                         | afe deposit box, and on hand when yo   | ou file your petition  Cash:            |  |
| 17. | -  | =   | certificates of deposit; shares in crecularity and the same institution, list each | = |  |
|     | ✓ Yes                                      |   | Institution name:  |   |  |
|     |  | 17.1. Checking account:                                       | Bank of America  |   | \$559.00   |
|     |  | 17.2. Checking account:                                       |  |   |  |
|     |  | 17.3. Savings account:  |  |   |  |
|     |  | 17.4. Savings account:  |  |   |  |
|     |  | 17.5. Certificates of deposit:                                |  |   |  |
|     |  | 17.6. Other financial account:                                |  |   |  |
|     |  | 17.7. Other financial account:                                |  |   |  |
|     |  | 17.8. Other financial account:                                |  |   |  |
|     |  | 17.9. Other financial account:                                |  |   |  |
| 18. | Examples: Bond funds, in                   | or publicly traded stocks<br>vestment accounts with brokerage | firms, money market accounts   |   |  |
|     | ✓ No ☐ Yes                                 | Institution or issuer name:                                   |  |   |  |
|     |  |   |  |   |  |
|     |  |   |  |   |  |
| 19. | an LLC, partnership, a                     |   | ed and unincorporated business   | es, including an interest in            |  |
|     | ✓ No  Yes. Give specific information about | Name of entity  |  | % of ownership:                         |  |
|     | them                                       |   |  |   |  |
|     |  |   |  |   |  |

|     | FIRST Name                       | Middle Name  | Document Page 15 of 69  |            |
|-----|----------------------------------|--|---|------------|
| 20. | Negotiable instruments in        | nclude personal checks, cashiers'                                | able and non-negotiable instruments checks, promissory notes, and money orders. to someone by signing or delivering them. |            |
| 21. |                                  |  | ), thrift savings accounts, or other pension or profit-sharing plans  |            |
|     | Yes. List each                   | Type of account:   | Institution name:   |            |
|     | account separately.              | 401(k) or similar plan:  | Bank of America   | \$15000.00 |
|     |                                  | 401(k) or similar plan:  | US Government Pension   | \$50000.00 |
|     |                                  | Pension plan:  |   |            |
|     |                                  | IRA:   |   |            |
|     |                                  | Retirement account:  |   |            |
|     |                                  | Keogh:   |   |            |
|     |                                  | Additional account:  |   | <u> </u>   |
|     |                                  | Additional account:  |   |            |
| 22. |                                  | deposits you have made so that yo                                | ou may continue service or use from a company cutilities (electric, gas, water), telecommunications  Institution name:    |            |
|     |                                  |  |   |            |
| 23. | Annuities (A contract for No Yes | r a periodic payment of money to y  Issuer name and description: | you, either for life or for a number of years)  |            |
|     |                                  |  |   |            |

Debtor 1 Claren Case 16-24749 Doc 1 Filed 08/02/416 Entered 08/02/416 (06:32:48 Desc Main

| Debt | or 1     | Clarence ase 16  | 6-24749                          | Doc 1           | Filed 08/02/16   | Entered 08/02/16<br>Page 16 of 69 | 6 (06;32: <u>48</u>  | Desc Main   |
|------|----------|--|----------------------------------|-----------------|--|-----------------------------------|----------------------|---|
| 24.  |          | erests in an educati<br>U.S.C. §§ 530(b)(1),                                     |                                  |                 | a qualified ABLE progra  | am, or under a qualified sta      | te tuition program.  |   |
|      |          | No Institution   | n name and de                    | escription. Sep | arately file the records of  | any interests.11 U.S.C. § 521(    | (c):                 |   |
| 25.  |          | usts, equitable or fu  |                                  | s in property   | (other than anything lis   | sted in line 1), and rights or    | powers               |   |
|      |          | No<br>Yes. Describe  |                                  |                 |  |                                   |                      |   |
| 26.  |          | amples: Internet doma  |                                  |                 | and other intellectual particle desertion of the intellec |                                   |                      |   |
| 27.  |          |  |                                  |                 |  | ngs, liquor licenses, professio   | nal licenses         |   |
| Mor  | ney      | or property ow   | ed to you?                       | •               |  |                                   |                      | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28.  | _        | refunds owed to yo   | ou                               |                 |  |                                   |                      |   |
|      |          | Yes. Give specific inf<br>about them, inc<br>you already file<br>and the tax yea | cluding whether<br>d the returns | er              |  |                                   | Federal:<br>State:   | \$0.00<br>\$0.00  |
| 20   | Fa       | •  |                                  |                 |  |                                   | Local:               | \$0.00  |
| 29.  | Exai     |  | mp sum alimoi                    | ny, spousal sup | oport, child support, mainte   | enance, divorce settlement, pro   | operty settlement    |   |
|      |          | No<br>Yes. Give specific inf   | ormation                         |                 |  |                                   | Alimony:             | \$0.00  |
|      |          | roor Civo opcome iiii  |                                  |                 |  |                                   | Maintenance:         | \$0.00  |
|      |          |  |                                  |                 |  |                                   | Support:             | \$0.00  |
|      |          |  |                                  |                 |  |                                   | Divorce settlement:  | \$0.00  |
|      |          |  |                                  |                 |  |                                   | Property settlement: | \$0.00  |
| 30.  |          |  | s, disability ins                |                 | nts, disability benefits, sick<br>made to someone else   | c pay, vacation pay, workers' co  | mpensation,          |   |
|      | <u>~</u> | No   |                                  |                 |  |                                   |                      |   |
|      |          | Yes. Describe  |                                  |                 |  |                                   |                      |   |

| Debt | or 1   | Clarende ase 16 First Name                           | 6-24749           | Doc 1<br>Middle Name | Filed 08/02 Documen                               |           | Entered 08/02/i                  | <b>16</b> 06:32: <u>48 D</u> | esc Main   |
|------|--------|--|-------------------|----------------------|---|-----------|----------------------------------|------------------------------|--|
| 31.  |        | rests in insurance բ<br>mples։ Health, disabil       |                   | rance; health        |   |           | edit, homeowner's, or rente      | r's insurance                |  |
|      |        | No<br>Yes. Name the insura<br>of each policy and lis |                   |                      | Company name:                                     |           |                                  | Beneficiary:                 | Surrender or refund value:   |
| 32.  | If you |  | of a living trust |                      | meone who has die<br>ceeds from a life insur      |           | policy, or are currently entitle | d to receive                 |  |
| 33.  |        |  |                   |                      | ı have filed a lawsui<br>nce claims, or rights to |           | ade a demand for payme           | nt                           |  |
|      |        | No<br>Yes. Describe                                  |                   |                      |   |           |                                  |                              |  |
| 34.  |        | er contingent and เ<br>et off claims                 | unliquidated      | claims of e          | very nature, includi                              | ng cou    | unterclaims of the debtor        | and rights                   |  |
|      |        | No<br>Yes. Describe                                  |                   |                      |   |           |                                  |                              |  |
| 35.  | _      | financial assets yo                                  | u did not alre    | ady list             |   |           |                                  |                              | '  |
|      |        | Yes. Describe  |                   |                      |   |           |                                  |                              | <u> </u>   |
| 36.  |        |  | -                 |                      |   |           | es for pages you have att        |                              | \$65559.00   |
| Part | 5:     | Describe Any B                                       | usiness-Ro        | elated Pro           | pperty You Own                                    | or Ha     | ave an Interest In. Li           | st any real estate i         | n Part 1.  |
| 37.  | Do y   | ou own or have an                                    | y legal or equ    | uitable intere       | est in any business-                              | -relate   | d property?                      |                              |  |
|      |        | No. Go to Part 6.<br>Yes. Go to line 38.             |                   |                      |   |           |                                  |                              | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 38.  | _      | ounts receivable or                                  | commissions       | s you alread         | ly earned   |           |                                  |                              | C. C.Onpuoro   |
|      |        | No<br>Yes. Describe                                  |                   |                      |   |           |                                  |                              | <del></del>  |
| 39.  |        | ce equipment, furn<br>mples: Business-rela           |                   |                      | nodems, printers, copi                            | iers, fax | k machines, rugs, telephone      | es, desks, chairs, electron  | ic devices   |
|      |        | No<br>Yes. Describe                                  |                   |                      |   |           |                                  |                              |  |

| Deb   | otor 1 <u>Clarende <b>ase 1</b></u>       | <u>6-24749 Doc 1</u>                                  | FIIEO OSKORA/ST/O  | Entered osado and be                    | 0.006w32: <u>48 D</u> | <u>esc Main</u>   |
|-------|---|---|--|---|-----------------------|---|
| 40.   | First Name  Machinery, fixtures, eq       | Middle Name<br>uipment, supplies you us               | Docum <sup>e</sup> tnt <sup>me</sup> I<br>se in business, and tools of | Page 18 of 69 your trade                |                       |   |
|       | <b>✓</b> No                               |   |  |   |                       |   |
|       | Yes. Describe                             |   |  |   |                       |   |
| 41.   | Inventory                                 |   |  |   |                       |   |
|       | <b>✓</b> No                               |   |  |   |                       |   |
|       | Yes. Describe                             |   |  |   |                       |   |
| 42.   | Interests in partnershi                   | ps or joint ventures                                  |  |   |                       |   |
|       | ✓ No                                      |   | Name of outing   | ·                                       | )/ of our arabin.     |   |
|       | Yes. Give specific information about them |   | Name of entity:  | ·                                       | % of ownership:       | _   |
| 40    |   |   |  |   |                       |   |
| 43. ( |   | lists, or other compilation                           | ns   |   |                       |   |
|       | No  | -ll   | information (an eleficación 44   | 110000000000000000000000000000000000000 |                       |   |
|       |   | ciude personally identifiable                         | information (as defined in 11  | U.S.C. § 101(41A))?                     |                       |   |
|       | ☐ No<br>☐ Yes. Descr                      | ibo   |  |   |                       |   |
|       | res. Desci                                | ibe   |  |   |                       |   |
| 44.   | Any business-related p                    | property you did not alread                           | dy list  |   |                       |   |
|       | <b>✓</b> No                               |   |  |   |                       |   |
|       | Yes. Give specific                        |   |  |   |                       |   |
|       | information                               | •   |  |   |                       |   |
|       |   | •   |  |   |                       |   |
|       |   |   |  |   |                       |   |
|       |   |   |  |   |                       |   |
|       |   |   |  |   |                       |   |
|       |   | •   |  |   |                       |   |
|       | add the dollar value of al                | I   | t 5, including any entries fo  | or pages you have attache               | d<br>▶                |   |
| Part  |   | Farm- and Commercian interest in farmland, list it in | al Fishing-Related Pro   | operty You Own or Ha                    | ve an Interest In     |   |
| 46.   | Do you own or have a                      | ny legal or equitable inter                           | est in any farm- or comme  | rcial fishing-related proper            | ty?                   |   |
|       | ✓ No. Go to Part 7.                       |   |  |   |                       | Current value of the  |
|       | Yes. Go to line 47.                       |   |  |   |                       | portion you own? Do not deduct secured claims or exemptions |
| 47.   | Farm animals  Examples: Livestock, pour   | ultry, farm-raised fish                               |  |   |                       |   |
|       | <b>✓</b> No                               |   |  |   |                       |   |
|       | Yes. Describe                             |   |  |   |                       |   |

| Deb          | tor 1    | Clarende ase 16-2 First Name                              | 24749 Doc 1<br>Middle Name   | Filed 08/02/16 Document    | <u>Entered</u> 08/02/16 06:32:4<br>Page 19 of 69 | l8 Desc      | Main          |
|--------------|----------|---|--|----------------------------|--|--------------|---------------|
| 48.          | Cro      | ps-either growing or I                                    | narvested  | Boodinone                  | 1 age 10 0.00                                    |              |               |
|              | <b>✓</b> | No  |  |                            |  |              |               |
|              |          | Yes. Describe   |  |                            |  |              |               |
| 49.          | Farr     | m and fishing equipm                                      | ent, implements, mach  | inery, fixtures, and tools | s of trade                                       |              |               |
|              | <b>✓</b> | No  |  |                            |  |              |               |
|              |          | Yes. Describe   |  |                            |  | _            |               |
| 50.          | Farı     | m and fishing supplies                                    | s, chemicals, and feed   |                            |  |              |               |
|              | <b>✓</b> | No  |  |                            |  |              |               |
|              |          | Yes. Describe   |  |                            |  |              |               |
| 51.          | Any      | farm- and commercia                                       | I fishing-related prope  | rty you did not already li | st   |              |               |
|              | <b>✓</b> | No  |  |                            |  |              |               |
|              |          | Yes. Describe   |  |                            |  | _            |               |
|              |          |   |  |                            |  |              |               |
|              |          |   | -  |                            | for pages you have attached                      |              |               |
|              |          |   |  |                            | ·  | L            |               |
|              |          |   |  |                            |  |              |               |
| Part         |          |   |  |                            | nat You Did Not List Above                       |              |               |
| 53.          |          | <b>you have other proper</b><br>mples: Season tickets, co | ty of any kind you did i   | not already list?          |  |              |               |
|              |          | •   | out in the more in |                            |  |              |               |
|              |          | Yes. Give specific  |  |                            |  |              | =             |
|              |          | information   |  |                            |  |              |               |
|              |          |   |  |                            |  |              |               |
|              |          |   |  |                            |  | _            |               |
| 54. A        | dd th    | e dollar value of all of                                  | your entries from Part   | 7. Write that number he    | re   | ▶            | -             |
|              |          |   |  |                            |  |              |               |
| Part         |          | l ist the Totals of                                       | Each Part of this F  | orm                        |  |              |               |
|              |          |   |  |                            |  |              |               |
| 55. <b>F</b> | Part 1   | : Total real estate, line                                 | 2  |                            | <b>&gt;</b>                                      |              | \$159145.00   |
| 56. <b>p</b> | oart 2   | total vehicles, line 5                                    |  | \$10825.0                  | 0  |              |               |
| 57. <b>P</b> | art 3:   | : Total personal and h                                    | ousehold items, line 1   | \$2850.00                  | <u> </u>   |              |               |
| 58. <b>P</b> | art 4:   | Total financial assets                                    | , line 36  | \$65559.0                  | 0  |              |               |
| 59. <b>F</b> | Part 5   | : Total business-relate                                   | ed property, line 45   |                            |  |              |               |
| 60. <b>F</b> | Part 6   | : Total farm- and fishi                                   | ng-related property, lir   | ne 52                      |  |              |               |
| 61. <b>F</b> | Part 7   | : Total other property                                    | not listed, line 54  |                            |  |              |               |
| 62. 7        | Γotal    | personal property. Add                                    | d lines 56 through 61  |                            | <u> </u>   |              | + \$79234.00  |
|              |          |   | -  | φ <i>1 9234.</i> C         | Copy personal prop                               | erty total ► | Τ ψ1 32.34.00 |
|              |          |   |  |                            |  |              | \$238379.00   |
| 63. <b>T</b> | otal c   | of all property on Sche                                   | edule A/B. Add line 55 +   | line 62                    |  |              |               |

Debtor 1 Clarence ase 16-24749 Doc 1 Filed 08/02/s16 Entered 08/02/s16 (06:32:48 Desc Main First Name Documentum Page 20 of 69

Schedule A/B: Property. Additional page

| Part 3: Describe Your Personal and Household Items |  |          |  |  |  |  |  |  |
|--|--|----------|--|--|--|--|--|--|
| Do you own or h                                    | Current value of the portion you own?  Do not deduct secured claims or exemptions. |          |  |  |  |  |  |  |
| 6.2. Household goo                                 | 6.2. Household goods and furnishings   |          |  |  |  |  |  |  |
| ☐ No   |  |          |  |  |  |  |  |  |
| Yes. Describe                                      | Couch and tables   | \$500.00 |  |  |  |  |  |  |
| 12.2. Jewelry                                      |  |          |  |  |  |  |  |  |
| ☐ No   |  |          |  |  |  |  |  |  |
| ✓ Yes. Describe                                    | Wedding Ring   | \$750.00 |  |  |  |  |  |  |

Case 16-24749 Doc 1 Filed 08/02/16 Entered 08/02/16 06:32:48 Desc Main Fill in this information to identify your case: Debtor 1 Clarence Robinson First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an Official Form 106C amended filing Schedule C: The Property You Claim as Exempt 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known). For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount. Part 1: Identify the Property You Claim as Exempt Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Amount of the exemption you claim Brief description of the property and line 
Current value of Specific laws that allow exemption on Schedule A/B that lists this property the portion you Check only one box for each exemption. own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$559.00 description: **Bank of America**  $\overline{\mathbf{v}}$ \$559.00 I ine from 100% of fair market value, up to any Schedule A/B: applicable statutory limit Brief 735 ILCS 5/12-704 \$15,000.00 description: **Bank of America** \$15,000.00 Line from 100% of fair market value, up to any Schedule A/B: 21 applicable statutory limit Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No Yes

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Filed 08/02/416 Entered 08/02/116/06/32:48 Desc Main Documeritime Page 22 of 69 Debtor 1 Claren Case 16-24749
First Name Doc 1

| Part 2: Addition                           | nal Page  |             | 3  |                                    |  |  |
|--|---|-------------|--|------------------------------------|--|--|
| •  | Brief description of the property and line on Schedule A/B that lists this property |             | Amount of the exemption you claim  Check only one box for each exemption.    | Specific laws that allow exemption |  |  |
| Brief description: Line from Schedule A/B: | US Government Pension 21  | \$50,000.00 | \$50,000.00  100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-704                  |  |  |
| Brief description: Line from Schedule A/B: | Misc. household goods and furniture   | \$550.00    | \$550.00  100% of fair market value, up to any applicable statutory limit    | 735 ILCS 5/12-1001(b)              |  |  |
| Brief description: Line from Schedule A/B: | Television, Computer  | \$500.00    | \$500.00  100% of fair market value, up to any applicable statutory limit    | 735 ILCS 5/12-1001(b)              |  |  |
| Brief description: Line from Schedule A/B: | Costume Jewelry  12   | \$200.00    | \$200.00  100% of fair market value, up to any applicable statutory limit    | 735 ILCS 5/12-1001(b)              |  |  |
| Brief description: Line from Schedule A/B: | Used men's clothing   | \$350.00    | \$350.00  100% of fair market value, up to any applicable statutory limit    | 735 ILCS 5/12-1001(a)              |  |  |

Case 16-24749 Doc 1 Filed 08/02/16 Entered 08/02/16 06:32:48 Desc Main Fill in this information to identify your case: Debtor 1 Clarence Robinson First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an Official Form 106D amended filing Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. List All Secured Claims Column B Column C List all secured claims. If a creditor has more than one secured claim, list the creditor separately for Column A each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much Amount of claim Value of collateral Unsecured as possible, list the claims in alphabetical order according to the creditor's name. Do not deduct the that supports portion value of collateral. this claim If any JARED-GALLERIA OF JWLR \$1,197.00 \$750.00 \$447.00 Describe the property that secures the claim: Creditor's Name PO Box 3680 Number Street As of the date you file, the claim is: Check all that apply. Contingent Akron Ohio 44309 Unliquidated City State 7IP Code Who owes the debt? Check one. Disputed ✓ Debtor 1 only Nature of lien. Check all that apply. Debtor 2 only An agreement you made (such as mortgage or Debtor 1 and Debtor 2 only secured car loan) At least one of the debtors and Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Check if this claim relates to a community debt Date debt was incurred 3/1/2014 Other (including a right to offset) Last 4 digits of account NATIONSTAR MORTGAGE LL \$159,145.00 \$30.855.00 \$190.000.00 Describe the property that secures the claim: Creditor's Name 350 HIGHLAND DR Mortgage Number Street As of the date you file, the claim is: Check all that apply. Contingent **LEWISVILLETexas** 75067 Unliquidated State City Who owes the debt? Check one. Disputed ✓ Debtor 1 only Nature of lien. Check all that apply. Debtor 2 only An agreement you made (such as mortgage or Debtor 1 and Debtor 2 only secured car loan) At least one of the debtors and Statutory lien (such as tax lien, mechanic's lien) another Judgment lien from a lawsuit Check if this claim relates to a community debt Date debt was incurred Other (including a right to offset) Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number

here:

Official Form 106D

\$191,197.00

Clarence ase 16-24749 Doc 1 Debtor 1 Document Page 24 of 69 **Additional Page** Column A Column B Column C Part:1 After listing any entries on this page, number them beginning with 2.3, followed by Amount of claim Value of collateral Unsecured 2.4, and so forth. Do not deduct the that supports portion value of collateral. this claim If any **CAPITAL ONE AUTO FINANCE** 2.3 \$5,069.25 \$0.00 \$10,825.00 Describe the property that secures the claim: Creditor's Name 3901 DALLAS PKWY Number Street As of the date you file, the claim is: Check all that apply. Contingent **PLANO** Texas 75093 Unliquidated ZIP Code City State Who owes the debt? Check one. Disputed ✓ Debtor 1 only Nature of lien. Check all that apply. Debtor 2 only An agreement you made (such as mortgage or secured Debtor 1 and Debtor 2 only At least one of the debtors and Statutory lien (such as tax lien, mechanic's lien) another Judgment lien from a lawsuit Check if this claim relates to a community debt Other (including a right to offset) Date debt was incurred Last 4 digits of account number **Bristol Bay Townhome Association** \$6,000.00 \$159,145.00 \$0.00 Describe the property that secures the claim: Creditor's Name 128 S County Farm Road 4542 Half Moon Drive # A, Yorkville, IL 60560 | Value: Street Number \$159,145.00 As of the date you file, the claim is: Check all that apply. Wh<u>eaton</u> Illinois 60187 Contingent ZIP Code City State Unliquidated Who owes the debt? Check one. ✓ Debtor 1 only Disputed Debtor 2 only Nature of lien. Check all that apply. Debtor 1 and Debtor 2 only An agreement you made (such as mortgage or secured car loan) At least one of the debtors and another Statutory lien (such as tax lien, mechanic's lien) Check if this claim relates to a Judgment lien from a lawsuit community debt Date debt was incurred Other (including a right to offset) Last 4 digits of account number PERSONAL FINANCE CO \$718.66 \$500.00 \$218.66 Describe the property that secures the claim: Creditor's Name 17507 SOUTH KEDZIE Couch and tables | Value: \$500.00 Number Street As of the date you file, the claim is: Check all that apply. Contingent **HAZEL** Unliquidated 60429 Illinois **CREST** State ZIP Code Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and Judgment lien from a lawsuit another Check if this claim relates to a Other (including a right to offset) community debt Date debt was incurred Last 4 digits of account number Add the dollar value of your entries in Column A on this page. Write that number \$11,787.91 If this is the last page of your form, add the dollar value totals from all pages. \$202,984.91 Write that number here:

Case 16-24749 Doc 1 Filed 08/02/16 Entered 08/02/16 06:32:48 Desc Main Fill in this information to identify your case: Debtor 1 Clarence Robinson Middle Name First Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: District of Illinois Northern (State) Case number (If known) Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? No. Go to Part 2. ✓ Yes. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total **Priority** Nonpriority claim amount amount 2.1 IRS 1 \$9,800.00 \$9,800.00 \$0.00 Last 4 digits of account number Priority Creditor's Name PO Box 7346 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent 19101 Philadelphia Pennsylvania Unliquidated Zip Code Citv State Who incurred the debt? Check one. Disputed Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were Check if this claim relates to a community debt intoxicated Is the claim subject to offset? **✓** No Other. Specify Yes

Filed 08k02k16 Entered 08k02k16 06k32:48 Desc Main Doc 1 Debtor 1 Documernt Page 26 of 69 List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ✓ Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of **Total claim** 4.1 Americash C/O Bankruptcy Department \$1,478.47 Last 4 digits of account number Nonpriority Creditor's Name 179 W Van Buren St When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Illinois 60605 City Zip Code State Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that Debtor 1 and Debtor 2 only you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Payday Loan Is the claim subject to offset? **✓** No Yes 4.2 IRS<sub>1</sub> \$2,376.22 Last 4 digits of account number \_ Nonpriority Creditor's Name PO Box 7346 When was the debt incurred? \_\_\_\_\_n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Pennsylvania 19101 Philadelphia Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_\_\_ non priority taxes Is the claim subject to offset? **✓** No Yes MERRICK BANK CORP \$824.77 Last 4 digits of account number \_\_\_\_ Nonpriority Creditor's Name 55 EAST ÁMES CT When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent **PLAINVIEW** New York 11803 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims

✓ No Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify Unsecured

Debtor 1 Clarence ase 16-24749 Doc 1

First Name

| Part 2: | Your | NONPRI | ORITY | Unsecured | Claim | s - | Con | tinu | atic | n | Pa | ıge |
|---------|------|--------|-------|-----------|-------|-----|-----|------|------|---|----|-----|
|         |      |        |       |           |       |     |     |      |      |   |    |     |

|     | After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. |   |          |  |
|-----|--|---|----------|--|
| 4.4 | Nicor Advanced Energy  | Last 4 digits of account number   | \$826.62 |  |
|     | Nonpriority Creditor's Name<br>PO Box 0632   | When was the debt incurred?   |          |  |
|     | Number Street  | As of the date you file, the claim is: Check all that apply.  |          |  |
|     |  | Contingent  |          |  |
|     | Aurora Illinois 60507  | Unliquidated  |          |  |
|     | City State Zip Code Who incurred the debt? Check one.  | Disputed  |          |  |
|     | Debtor 1 only  | Type of NONPRIORITY unsecured claim:  |          |  |
|     | Debtor 2 only  | Student loans   |          |  |
|     | Debtor 1 and Debtor 2 only   | Obligations arising out of a separation agreement or divorce that                                       |          |  |
|     | At least one of the debtors and another  | you did not report as priority claims   |          |  |
|     | Check if this claim relates to a community debt  | Debts to pension or profit-sharing plans, and other similar debts                                       |          |  |
|     | Is the claim subject to offset?  | ✓ Other. Specify <u>Utility</u>   |          |  |
|     | ✓ No   |   |          |  |
|     | Yes  |   |          |  |
| 4.5 | Portfolio Recovery Nonpriority Creditor's Name   | Last 4 digits of account number   | \$285.94 |  |
|     | Dept 922, PO Box 4115  | When was the debt incurred?n/a  |          |  |
|     | Number Street  | As of the date you file, the claim is: Check all that apply.  |          |  |
|     |  | Contingent  |          |  |
|     | Concord California 94524   | Unliquidated  |          |  |
|     | City State Zip Code  | Disputed  |          |  |
|     | Who incurred the debt? Check one.  | Type of NONPRIORITY unsecured claim:  |          |  |
|     | Debtor 1 only  Debtor 2 only   | Student loans   |          |  |
|     | Debtor 1 and Debtor 2 only   | Obligations arising out of a separation agreement or divorce that                                       |          |  |
|     | At least one of the debtors and another  | you did not report as priority claims   |          |  |
|     | 불  | Debts to pension or profit-sharing plans, and other similar debts                                       |          |  |
|     | Check if this claim relates to a community debt Is the claim subject to offset?                        | ✓ Other. Specify <u>Cap One/HSBC</u>  |          |  |
|     | No   |   |          |  |
|     | Yes  |   |          |  |
| 4.6 |  |   | \$341.97 |  |
| 1.0 | Nonpriority Creditor's Name  | - Last 4 digits of account number   | ψο-1.57  |  |
|     | 2001 Western Ave Ste 400<br>Number Street  | When was the debt incurred?n/a  |          |  |
|     |  | As of the date you file, the claim is: Check all that apply.  |          |  |
|     |  | Contingent  |          |  |
|     | Seattle Washington 98121   | Unliquidated  |          |  |
|     | City State Zip Code  Who incurred the debt? Check one.   | ☐ Disputed  |          |  |
|     | Debtor 1 only  | Type of NONPRIORITY unsecured claim:  |          |  |
|     | Debtor 2 only  | Student loans   |          |  |
|     | Debtor 1 and Debtor 2 only   | Obligations arising out of a separation agreement or divorce that you did not report as priority claims |          |  |
|     | At least one of the debtors and another  | Debts to pension or profit-sharing plans, and other similar debts                                       |          |  |
|     | Check if this claim relates to a community debt  | ✓ Other. Specify Capital One  |          |  |
|     | Is the claim subject to offset?  |   |          |  |
|     | No   |   |          |  |
|     | Yes  |   |          |  |

Debtor 1 Claren Case 16-24749 Doc 1 Filed 08/02/16 Entered 08/02/16 (06:32:48 Desc Main

rst Name Middle Name

Document Page 28 of 69

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** WORLD ACCEPTANCE CORP 4.7 \$1,890.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 6429 When was the debt incurred? n/a Street Number As of the date you file, the claim is: Check all that apply. Contingent Greenville South Carolina Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? Unsecured

✓ No Yes Debtor 1 Claren Case 16-24749 Doc 1 Filed 08/02/16 Entered 08/02/16 (06:32:48 Desc Main

st Name Mi

amount here.

6j. Total. Add lines 6f through 6i.

Document

6i. Other. Add all other nonpriority unsecured claims. Write that 6i.

Page 29 of 69

\$8.023.99

6j.

Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$9,800.00 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. \$0.00 6d. Other. Add all other priority unsecured claims. Write that \$0.00 amount here. 6e. Total. Add lines 6a through 6d. \$9,800.00 **Total claims** \$0.00 **Total claims** 6f. Student loans from Part 2 6g. Obligations arising out of a separation agreement or divorce 6g. that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h.

Case 16-24749 Doc 1 Filed 08/02/16 Entered 08/02/16 06:32:48 Desc Main Fill in this information to identify your case: Debtor 1 Clarence Robinson First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an Official Form 106G amended filing Schedule G: Executory Contracts and Unexpired Leases Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known). 1. Do you have any executory contracts or unexpired leases? No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B). 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

State what the contract or lease is for

Person or company with whom you have the contract or lease

Case 16-24749 Doc 1 Filed 08/02/16 Entered 08/02/16 06:32:48 Desc Main Fill in this information to identify your case: Clarence Debtor 1 Robinson First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an amended filing Official Form 106H **Schedule H: Your Codebtors** Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing

12/15

together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| 1. | <ul> <li>Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)</li> <li>No</li> <li>Yes</li> </ul>   |   |  |  |  |  |  |  |
|----|--|---|--|--|--|--|--|--|
| 2. | Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)  No. Go to line 3.  Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  |   |  |  |  |  |  |  |
|    | ✓ No   |   |  |  |  |  |  |  |
|    | Yes. In which community state or territory did you live? Fill in the name an   | nd current address of that person.          |  |  |  |  |  |  |
|    | Name of your spouse, former spouse, or legal equivalent  |   |  |  |  |  |  |  |
|    | Number Street  |   |  |  |  |  |  |  |
|    | City State Zip Code  |   |  |  |  |  |  |  |
| 3. | <ol> <li>In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.</li> </ol> |   |  |  |  |  |  |  |
|    | Column 1: Your codebtor  | mn 2: The creditor to whom you owe the debt |  |  |  |  |  |  |
|    | Check  | k all schedules that apply:                 |  |  |  |  |  |  |

Case 16-24749 Doc 1 Filed 08/02/16 Entered 08/02/16 06:32:48 Desc Main Fill in this information to identify your case: Debtor 1 Clarence First Name Middle Name Last Name Check if this is: Debtor 2 An amended filing (Spouse, if filing) First Name Middle Name Last Name A supplement showing post-petition chapter 13 United States Bankruptcy Court for the: Northern District of Illinois expenses as of the following date: (State) Case number MM / DD / YYYY (If known) Official Form 106I Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment **Debtor 1** Debtor 2 1. Fill in your employment information. **Employment status** Employed Employed If you have more than one ✓ Not Employed ✓ Not Employed job, attach a separate page with Occupation information about additional employers. **Employer's name** Include part time, seasonal, **Employer's address** Number Street Number Street self-employed work. Occupation may include student or homemaker, if it applies. Zip Code Zip Code How long employed there? Part 2: **Give Details About Monthly Income** Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. **List monthly gross wages, salary, and commissions** (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

|    | For Debtor 1 | For Debtor 2 or non-filing spouse |  |  |  |
|----|--------------|-----------------------------------|--|--|--|
| 2. | \$0.00       | \$0.00                            |  |  |  |
| 3  | + \$0.00     | + \$0.00                          |  |  |  |
| 4. | \$0.00       | \$0.00                            |  |  |  |

Debtor 1 Clarence ase 16-24749 <u>Entered</u> @&&02/166 @6:332:48 Doc 1 Filed 08#02/\s16 First Name Middle Name Documentame Page 33 of 69 For Debtor 2 or For Debtor 1 non-filing spouse \$0.00 Copy line 4 here \$0.00 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions \$0.00 5a. \$0.00 \$0.00 5b. Mandatory contributions for retirement plans 5b. \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 \$0.00 \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 5e. \$0.00 \$0.00 5e. Insurance 5f. Domestic support obligations 5f. \$0.00 \$0.00 5g. \$0.00 5a. Union dues \$0.00 5h. Other deductions. Specify: 5h. \$0.00 \$0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. \$0.00 \$0.00 6. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$0.00 \$0.00 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total \$0.00 \$0.00 monthly net income. 8a. 8b. \$0.00 \$0.00 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce \$0.00 \$0.00 80 settlement, and property settlement. 8d. Unemployment compensation 8d. \$0.00 \$0.00 8e. Social Security 8e. \$2,001.20 \$1,000.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies 8f. \$0.00 \$0.00 Specify: 8g. \$1,287.00 \$0.00 8g. Pension or retirement income 8h. Other monthly income. Specify: 8h. \$0.00 \$0.00 9. **Add all other income** Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$3,288.20 \$1,000.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$3,288.20 \$1,000.00 \$4,288.20 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 11. + \$0.00 Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 12. \$4,288.20 Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. Yes. Explain:

Case 16-24749 Doc 1 Filed 08/02/16 Entered 08/02/16 06:32:48 Desc Main Fill in this information to identify your case: Debtor 1 Clarence Robinson First Name Middle Name Last Name Check if this is: Debtor 2 (Spouse, if filing) First Name Middle Name Last Name An amended filing A supplement showing post-petition chapter 13 United States Bankruptcy Court for the: Northern District of Illinois expenses as of the following date: (State) Case number (If known) MM / DD / YYYY Official Form 106J Schedule J: Your Expenses 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Your Household 1. Is this a joint case? ✓ No. Go to line 2 Yes. Does Debtor 2 live in a separate household? No Yes. Debtor 2 must file Official Forms 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? Do not list Debtor 1 and Yes. Fill out this information for Dependent's relationship to Dependent's Does dependent live Debtor 2. each dependent Debtor 1 or Debtor 2 with you? age 3. Do your expenses include **✓** No expenses of people other ☐ Yes yourself and your dependents? Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of Your expenses such assistance and have included it on Schedule I: Your Income (Official Form B 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and \$1,340.00 any rent for the ground or lot. 4. 4. If not included in line 4: 4a. Real estate taxes \$0.00 4a 4b. Property, homeowner's, or renter's insurance \$198.00 4b. 4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

\$0.00

\$0.00

4c.

**4**d

Debtor 1 Claren Case 16-24749 Doc 1 Filed 08/02/416 Entered 08/02/416 06:32:48 Desc Main

Document Page 35 of 69 Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$200.00 6a. 6b. Water, sewer, garbage collection \$115.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$250.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$500.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning \$200.00 9. 10. Personal care products and services \$120.00 10. 11. Medical and dental expenses \$76.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$200.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$100.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$139.00 15b 15c. Vehicle insurance \$150.00 15c 15d. Other insurance. Specify: \$0.00 15d 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 \$0.00 17a 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106l). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20b 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

| Debtor 1         | Clarence ase 1        | 6-24749           | Doc 1            | Filed 08:40:21/11/16          | Entered 08/02/          | 116 (06:32:48 | Desc Main |            |
|------------------|-----------------------|-------------------|------------------|-------------------------------|-------------------------|---------------|-----------|------------|
|                  | First Name            |                   | Middle Name      | Documetht <sup>me</sup>       | Page 36 of 69           |               |           |            |
| 21.Other         | . Specify:            |                   |                  |                               | _                       | 2′            | 1         | \$0.00     |
|                  |                       |                   |                  |                               |                         |               |           |            |
| 22. Calcu        | late your monthly     | expenses.         |                  |                               |                         |               |           | \$3,588.00 |
| 22a. A           | dd lines 4 through 2  | 21.               |                  |                               |                         |               |           | \$0.00     |
| 22b. C           | copy line 22 (monthly | y expenses for    | Debtor 2), if an | y, from Official Form 106J    | -2                      |               | _         | \$3,588.00 |
| 22c. A           | dd line 22a and 22b   | . The result is y | our monthly ex   | rpenses.                      |                         | 22            | .         |            |
| 23.Calcu         | late your monthly     | net income.       |                  |                               |                         |               | -         |            |
| 23a. C           | Copy line 12 (your co | mbined monthl     | y income) from   | Schedule I.                   |                         | 238           | a         | \$4,288.20 |
| 23b. C           | copy your monthly ex  | penses from lin   | ne 22 above.     |                               |                         | 238           | _         | \$3,588.00 |
| 23c. S           | ubtract your monthly  | expenses from     | n your monthly   | income.                       |                         |               |           | \$700.20   |
| -                | The result is your mo | onthly net incon  | ne.              |                               |                         | 230           | -         |            |
| 24. <b>Do yo</b> | ou expect an increa   | ase or decreas    | se in your exp   | enses within the year af      | ter you file this form? |               |           |            |
| -<br>-           | ·                     | aat ta finiah nav | ina for volve on | r loan within the year or do  | vou eve est vour        |               |           |            |
|                  |                       |                   | 0 ,              | of a modification to the term |                         |               |           |            |
| <b>√</b> 1       | No                    |                   |                  |                               | , 55                    |               |           |            |
|                  | NO                    |                   |                  |                               |                         |               |           |            |
| □ /              | ⁄es                   |                   |                  |                               |                         |               |           | ,          |
|                  | Explain he            | re:               |                  |                               |                         |               |           |            |
|                  |                       |                   |                  |                               |                         |               |           |            |
|                  |                       |                   |                  |                               |                         |               |           |            |
|                  |                       |                   |                  |                               |                         |               |           |            |
|                  |                       |                   |                  |                               |                         |               |           | ]          |
|                  |                       |                   |                  |                               |                         |               |           |            |
|                  |                       |                   |                  |                               |                         |               |           |            |

Case 16-24749 Doc 1 Filed 08/02/16 Entered 08/02/16 06:32:48 Desc Main Fill in this information to identify your case: Debtor 1 Clarence Robinson First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name Northern District of Illinois United States Bankruptcy Court for the: (State) Case number (If known) Check if this is an Official Form 106Dec amended filing **Declaration About an Individual Debtor's Schedules** 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Part 1: Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? **✓** No Attach Bankruptcy Petition Preparer's Notice, Declaration, and Yes. Name of person Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and

Signature of Debtor 2

MM/DD/YYYY

that they are true and correct.

/s/ Clarence Robinson

MM/DD/YYYY

Signature of Debtor 1

Date 8/2/2016

Case 16-24749 Doc 1 Filed 08/02/16 Entered 08/02/16 06:32:48 Desc Main Fill in this information to identify your case: Debtor 1 Clarence Robinson First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an Official Form 107 amended filing Statement of Financial Affairs for Individuals Filing for Bankruptcy 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before What is your current marital status? ✓ Married Not married During the last 3 years, have you lived anywhere other than where you live now? **✓** No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. **Dates Debtor 1 lived** Debtor 1: Debtor 2: **Dates Debtor 2 lived** there there Same as Debtor 1 Same as Debtor 1 From \_\_\_\_ Number Street Number Street City City State Zip Code State Zip Code Same as Debtor 1 Same as Debtor 1 From Number Street Number Street To City State Zip Code City State Zip Code

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

**☑** N

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Debtor 1 <u>Claren Case 16-24749 Doc 1 Filed 08/02/416 Entered</u> 02/02/116 (06:32:48 <u>Desc Main</u>

| Deptor  | Clarence a SE 10-24/49 | DUC I       | FILEU OOKOOZENSILIO | <u> </u>      | Desc Main |  |  |  |
|---|------------------------|-------------|---------------------|---------------|-----------|--|--|--|
|   | First Name             | Middle Name | Documet Ntme        | Page 39 of 69 |           |  |  |  |
| Part 2: Explain the Sources of Your Income  |                        |             |                     |               |           |  |  |  |
| 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time |                        |             |                     |               |           |  |  |  |

| ✓ Yes. Fill in the details.  |  |   |  |   |
|--|--|---|--|---|
|  | Debtor 1   |   | Debtor 2   |   |
|  | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions)   | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions) |
| From January 1 of current year until the date you filed for bankruptcy:  | Wages, commissions, bonuses, tips Operating a business   |   | Wages, commissions, bonuses, tips Operating a business   |   |
| For last calendar year: (January 1 to December 31,   | Wages, commissions, bonuses, tips Operating a business   | \$95722.00  | Wages, commissions, bonuses, tips Operating a business   |   |
| For the calendar year before that: (January 1 to December 31,2014)   | Wages, commissions, bonuses, tips  | \$97267.00  | Wages,<br>commissions,<br>bonuses, tips  |   |
| Did you receive any other income during the notice income regardless of whether that income enefit payments; pensions; rental income; intend you have income that you received together  | Operating a business  his year or the two previou me is taxable. Examples of cerest; dividends; money colle  | other income are alimony; child<br>acted from lawsuits; royalties; a  | Operating a business support; Social Security, uner  |   |
| Did you receive any other income during the notice income regardless of whether that income enefit payments; pensions; rental income; into and you have income that you received together ist each source and the gross income from each of the process income | Operating a business  as year or the two previou me is taxable. Examples of cerest; dividends; money coller, list it only once under Debt  | other income are alimony; child<br>acted from lawsuits; royalties; a<br>or 1.   | Operating a business support; Social Security, uner and gambling and lottery winning   |   |
| Did you receive any other income during the notation income regardless of whether that income enefit payments; pensions; rental income; into and you have income that you received together ist each source and the gross income from each   | Operating a business  as year or the two previou me is taxable. Examples of cerest; dividends; money coller, list it only once under Debt  | other income are alimony; child<br>acted from lawsuits; royalties; a<br>or 1.   | Operating a business support; Social Security, uner and gambling and lottery winning   |   |
| Did you receive any other income during the notice income regardless of whether that income enefit payments; pensions; rental income; into and you have income that you received together ist each source and the gross income from each of the process income | Operating a business  as year or the two previous me is taxable. Examples of cerest; dividends; money coller, list it only once under Debt ach source separately. Do not   | other income are alimony; child<br>acted from lawsuits; royalties; a<br>or 1.   | Operating a business support; Social Security, uner nd gambling and lottery winning in line 4.                               |   |
| Did you receive any other income during the clude income regardless of whether that incomenefit payments; pensions; rental income; intend you have income that you received together ist each source and the gross income from each of the company of  | Debtor 1  Sources of income Describe below.  | content income are alimony; child acted from lawsuits; royalties; a cor 1.  It include income that you listed that you listed the compact of | Operating a business  support; Social Security, uner nd gambling and lottery winning in line 4.  Debtor 2  Sources of income | Gross income from each source (before deductions and  |
| Did you receive any other income during the clude income regardless of whether that incomenefit payments; pensions; rental income; intend you have income that you received together ist each source and the gross income from each of the company of  | Operating a business  is year or the two previous me is taxable. Examples of cerest; dividends; money coller, list it only once under Debt ach source separately. Do not the collection of the c | content income are alimony; child acted from lawsuits; royalties; a cor 1.  It include income that you listed that you listed the company of | Operating a business  support; Social Security, uner nd gambling and lottery winning in line 4.  Debtor 2  Sources of income | Gross income from each source (before deductions and  |
| id you receive any other income during the clude income regardless of whether that incomending payments; pensions; rental income; intend you have income that you received together sist each source and the gross income from each of the company of  | Debtor 1  Sources of income Describe below.  | content income are alimony; child acted from lawsuits; royalties; a cor 1.  It include income that you listed that you listed the compact of | Operating a business  support; Social Security, uner nd gambling and lottery winning in line 4.  Debtor 2  Sources of income | Gross income from each source (before deductions and  |

Debtor 1 Clarence ase 16-24749 Doc 1 Filed 08/03/416 Entered 08/03/416 06:32:48 Desc Main
First Name Document Page 40 of 69

| Part 3:  | List (     | Certain F    | Payments     | s You Made Be                           | fore You Filed for B          | ankruptcy   |                               |                               |
|----------|------------|--------------|--------------|---|-------------------------------|---|-------------------------------|-------------------------------|
| 6. Ar    | e either [ | Debtor 1's   | or Debtor    | 2's debts primaril                      | y consumer debts?             |   |                               |                               |
|          | -          |              |              | Debtor 2 has prima<br>household purpose | •                             | onsumer debts are defined in  | 11 U.S.C. § 101(8) as "incurr | ed by an individual primarily |
|          | Dı         | uring the 90 | O days befor | re you filed for bank                   | ruptcy, did you pay any cred  | ditor a total of \$6,425* or more   | 9?                            |                               |
|          | Г          | No. Go       | to line 7.   |   |                               |   |                               |                               |
|          |            | to           | tal amount   | you paid that credito                   | or. Do not include payment    | or more in one or more paym<br>s for domestic support obligat<br>an attorney for this bankruptc | ions, such as                 |                               |
|          | * 5        | Subject to a | adjustment o | on 4/01/19 and ever                     | y 3 years after that for case | s filed on or after the date of a   | adjustment.                   |                               |
| <b>✓</b> | Yes. Do    | ebtor 1 or   | Debtor 2 d   | or both have prim                       | arily consumer debts.         |   |                               |                               |
|          | Du         | uring the 90 | O days befor | re you filed for bank                   | ruptcy, did you pay any cred  | ditor a total of \$600 or more?   |                               |                               |
|          | V          | No. Go       | to line 7.   |   |                               |   |                               |                               |
|          | Ė          |              |              | ch creditor to whom                     | you paid a total of \$600 or  | more and the total amount yo  | u naid                        |                               |
|          |            | th           | at creditor. | Do not include payr                     |                               | t obligations, such as child su   |                               |                               |
|          |            |              |              |   | Dates of payment              | Total amount paid   | Amount you still owe          | Was this payment for          |
|          | Credite    | or's Name    |              |   |                               |   |                               | Mortgage                      |
|          | Numbe      | er Street    |              |   |                               |   |                               | Car                           |
|          | INUITIDE   | ei Stieet    |              |   |                               |   |                               | Credit card Loan repayment    |
|          |            |              |              |   |                               |   |                               | Suppliers or                  |
|          | City       |              | State        | Zip Code                                |                               |   |                               | vendors                       |
|          |            |              |              |   |                               |   |                               | Other                         |
|          | Credit     | or's Name    |              |   |                               |   |                               | ☐ Mortgage<br>☐ Car           |
|          | Numbe      | er Street    |              |   |                               |   |                               | Car Card Credit card          |
|          |            |              |              |   |                               |   |                               | Loan repayment                |
|          |            |              |              |   |                               |   |                               | Suppliers or                  |
|          | City       |              | State        | Zip Code                                |                               |   |                               | vendors                       |
|          |            |              |              |   | -                             |   |                               | Other Martage                 |
|          | Credite    | or's Name    |              |   |                               |   |                               | ☐ Mortgage<br>☐ Car           |
|          | Numbe      | er Street    |              |   |                               |   |                               | Credit card                   |
|          |            |              |              |   |                               |   |                               | Loan repayment                |
|          | C:+        |              | Ctoto        | 7in Carla                               |                               |   |                               | Suppliers or                  |
|          | City       |              | State        | Zip Code                                |                               |   |                               | vendors Other                 |

Filed 08/02/46 Entered 08/02/16/06:32:48 Desc Main Clarence ase 16-24749 Doc 1 Debtor 1 Document Page 41 of 69 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of Amount you still Reason for this payment Total amount payment paid owe Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Total amount Amount you still Reason for this payment paid payment owe Include creditor's name Insider's Name Number Street Zip Code City State Insider's Name Number Street City State Zip Code

Debtor 1 Claren Case 16-24749 Doc 1 Filed 08/02/416 Entered 08/02/416 (06:32:48 Desc Main First Name Middle Name Documes Here Page 42 of 69

Document Page 42 of 69

| st all such matters, including personal injury ca   | y, were you a party in any laws<br>ases, small claims actions, divorc                               |   | paternity action | ns, support or c | ustody modifications, and c               |
|---|---|---|------------------|------------------|---|
| putes.  |   |   |                  |                  |   |
| No Yes. Fill in the details.  |   |   |                  |                  |   |
| 10011   | Nature of the case  | Court or a  | gency            |                  | Status of the case                        |
| Case title  |   |   |                  |                  | Pending                                   |
| <u> </u>  |   | Court Nam   | е                |                  | On appeal                                 |
| Case number   |   | Number Str  | reet             |                  | Concluded                                 |
|   |   | City  | State            | Zip Code         |   |
| Case title  |   |   |                  |                  | Pending                                   |
|   |   | Court Nam   | е                |                  | On appeal                                 |
| Case number   |   | Number Str  | eet              |                  | Concluded                                 |
|   |   | City  | State            | Zip Code         |   |
| Check all that apply and fill in the details below  |   | -   |                  | -                | seized, or levied?                        |
| Check all that apply and fill in the details below  No. Go to line 11.  |   | epossessed, forec   |                  | -                | seized, or levied?  Value of the property |
| Check all that apply and fill in the details below  No. Go to line 11.  |   | epossessed, forec   |                  | hed, attached,   | Value of the                              |
| Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name                                |   | epossessed, fored   |                  | hed, attached,   | Value of the                              |
| Yes. Fill in the information below.   | Describe the pro  | epossessed, fored   |                  | hed, attached,   | Value of the                              |
| Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name                                | Describe the pro  | epossessed, fored   |                  | hed, attached,   | Value of the                              |
| Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street                 | Explain what ha   | pperty  ppened  repossessed. foreclosed. garnished.                           | closed, garnis   | hed, attached,   | Value of the                              |
| Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street                 | Explain what has Property was Property was Property was Property was Property was Property was      | pperty  ppened  repossessed. foreclosed. garnished. attached, seized, c       | closed, garnis   | Date             | Value of the property                     |
| Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street                 | Explain what ha   | pperty  ppened  repossessed. foreclosed. garnished. attached, seized, c       | closed, garnis   | hed, attached,   | Value of the                              |
| Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street                 | Explain what has Property was Property was Property was Property was Property was Property was      | pperty  ppened  repossessed. foreclosed. garnished. attached, seized, c       | closed, garnis   | Date             | Value of the property  Value of the       |
| Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street  City State Zip | Explain what has Property was Property was Property was Property was Property was Property was      | pperty  ppened  repossessed. foreclosed. garnished. attached, seized, coperty | closed, garnis   | Date             | Value of the property  Value of the       |
| Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street  City State Zip | Explain what hale Property was Property was Property was Property was Property was Describe the pro | pperty  ppened  repossessed. foreclosed. garnished. attached, seized, coperty | closed, garnis   | Date             | Value of the property  Value of the       |

| Deb | tor 1 | Clarence ase 16-24749 First Name  |                       | d 08k <mark>03/\$16</mark> | <u>Entered</u> <b>0%/02/1</b><br>Page 43 of 69 | .6 (06:32: <u>4</u> | 18 Desc                        | <u>Main</u>              |
|-----|-------|---|-----------------------|----------------------------|--|---------------------|--------------------------------|--------------------------|
| 11. |       | hin 90 days before you filed for<br>ounts or refuse to make a paym        | · bankruptcy, did any | creditor, includin         | •  | tution, set off     | any amounts f                  | rom your                 |
|     |       | No<br>Yes. Fill in the details.   |                       |                            |  |                     |                                |                          |
|     |       |   |                       | Describe the act           | ion the creditor took                          |                     | Date action<br>vas taken       | Amount                   |
|     |       | Creditor's Name   |                       |                            |  |                     |                                |                          |
|     |       | Number Street   |                       | Last 4 digits of ac        | count number: XXXX-                            |                     |                                |                          |
|     |       | City State  | Zip Code              |                            |  |                     |                                |                          |
| 12. |       | nin 1 year before you filed for b<br>viver, a custodian, or another of    |                       | of your property in        | the possession of an ass                       | signee for the      | benefit of cred                | itors, a court-appointed |
|     |       | No<br>Yes   |                       |                            |  |                     |                                |                          |
|     |       | List Certain Gifts and Co   |                       |                            |  | ****                |                                |                          |
| 13. | WI    | thin 2 years before you filed for  No Yes. Fill in the details for each o |                       | give any gifts wit         | n a total value of more tha                    | an \$600 per po     | erson ?                        |                          |
|     |       | Gifts with a total value of mor   |                       | Describe the gif           | ts   | ç                   | Dates you<br>gave the<br>gifts | Value                    |
|     |       | Person to Whom You Gave the C   | Gift                  |                            |  | -                   |                                |                          |
|     |       | Number Street   |                       |                            |  |                     |                                |                          |
|     |       | City State  Person's relationship to you                                  | Zip Code              |                            |  |                     |                                |                          |
|     |       | Person to Whom You Gave the C   | Gift                  |                            |  | -                   |                                |                          |
|     |       | Number Street   |                       |                            |  |                     |                                |                          |
|     |       | City State  Person's relationship to you                                  | Zip Code              |                            |  |                     |                                |                          |
|     |       |   |                       |                            |  |                     |                                |                          |

| Deb  | tor 1    | Claren Case 16-24749 First Name  |                    | ed 08k02k16<br>Documetht <sup>me</sup> | Entered 08/02/16/06:3 Page 44 of 69  | 2: <u>48 Desc</u>                  | : Main                 |
|------|----------|--|--------------------|--|--|------------------------------------|------------------------|
| 14.  | Wit      | hin 2 years before you filed for I   | bankruptcy, did yo | u give any gifts or                    | contributions with a total value of m  | ore than \$600 to a                | any charity?           |
|      | <b>✓</b> | No   |                    |  |  |                                    |                        |
|      |          | Yes. Fill in the details for each gift   |                    |  |  | _                                  |                        |
|      |          | Gifts with a total value of more per person  | e than \$600       | Describe the gi                        | fts  | Dates you gave the gifts           | Value                  |
|      |          | Charity's Name   |                    |  |  |                                    | <u> </u>               |
|      |          |  | _                  |  |  |                                    |                        |
|      |          | Number Street  |                    |  |  |                                    |                        |
|      |          | City State   | Zip Code           |  |  |                                    |                        |
| Part | ^        | List Certain Losses  | Zip Code           |  |  |                                    |                        |
| 15.  | gam      | nin 1 year before you filed for ba<br>bling?<br>No<br>Yes. Fill in the details.    | nkruptcy or since  | you filed for bankr                    | uptcy, did you lose anything becaus  | e of theft, fire, oth              | er disaster, or        |
|      |          | Describe the property you lost how the loss occurred                               | t and              | Include the amou                       | surance coverage for the loss  Int that insurance has paid. List be claims on line 33 of Schedule A/B:                                 | Date of your loss                  | Value of property lost |
|      |          |  |                    | Property.                              | occidents on line 33 of occidence PVD.   |                                    |                        |
|      |          |  |                    |  |  |                                    |                        |
| Part | 7:       | List Certain Payments or   | Transfers          |  |  |                                    |                        |
| 16.  | seek     | king bankruptcy or preparing a l   | bankruptcy petitio | n?<br>edit counseling agend            | ing on your behalf pay or transfer and items for services required in your bankrup transfer and the services required in your bankrup. | otcy.                              | Amount of payment      |
|      |          |  |                    |  |  | payment or<br>transfer was<br>made |                        |
|      |          | Semrad Law Firm Person Who Was Paid 20 South Clark Street 28th Floor Number Street |                    | Attorney's Fee - 5                     | 00.00  | 8/1/2016                           | \$500.00               |
|      |          | Chicago Illinois   | 60606              |  |  |                                    |                        |
|      |          | City State   | Zip Code           |  |  |                                    |                        |
|      |          | Email or website address   |                    |  |  |                                    |                        |
|      |          | Person Who Made the Payment,   | if Not You         |  |  |                                    |                        |
|      |          | Person Who Was Paid  |                    |  |  |                                    |                        |
|      |          | Number Street  |                    |  |  |                                    |                        |
|      |          | City State   | Zip Code           |  |  |                                    |                        |
|      |          | Email or website address   |                    |  |  |                                    |                        |
|      |          | Person Who Made the Payment,   | if Not You         |  |  |                                    |                        |

| У | Within 1 year before you filed for bankruptcy, did yo<br>you deal with your creditors or to make payments to<br>Do not include any payment or transfer that you listed on I  | your creditors?                            |                       | property to anyone w       | ho promised to h |
|---|--|--|-----------------------|----------------------------|------------------|
| ı | <b>√</b> No  |  |                       |                            |                  |
| ŀ |  |  |                       |                            |                  |
| ı | Yes. Fill in the details.  |  |                       |                            |                  |
|   |  | Description and value of any prop          | erty transferred      |                            | nount of paymer  |
|   |  |  |                       | payment or<br>transfer was |                  |
|   |  |  |                       | made                       |                  |
|   |  |  |                       | maas                       |                  |
|   | Person Who Was Paid  | -  |                       |                            |                  |
|   | 1 CISOTI VVIIO VVAS I AIA  |  |                       |                            |                  |
|   | Number Street  | -  |                       |                            |                  |
|   |  |  |                       |                            |                  |
|   |  | -  |                       |                            |                  |
|   |  | _  |                       |                            |                  |
|   | City State Zip Code  |  |                       |                            |                  |
|   | ransfers that you have already listed on this statement.  No Yes. Fill in the details.   |  |                       |                            |                  |
|   |  | Description and value of any               | Describe any          | property or payments       | Date transfe     |
|   |  | property transferred                       | received or o         | lebts paid in              | was made         |
|   |  |  | exchange              |                            |                  |
|   |  | _  |                       |                            |                  |
|   | Person Who Received Transfer   |  |                       |                            |                  |
|   | 1 CISOTI WHO NECEWED TRANSICI  |  |                       |                            |                  |
|   | Number Street  | -  |                       |                            |                  |
|   |  | -  |                       |                            |                  |
|   |  | -<br>-                                     |                       |                            |                  |
|   | Number Street  | -<br>-<br>-                                |                       |                            |                  |
|   | Number Street  City State Zip Code   | -<br>-<br>-                                |                       |                            |                  |
|   | Number Street  | -<br>-<br>-                                |                       |                            |                  |
|   | Number Street  City State Zip Code Person's relationship to you  | -<br>-<br>-                                |                       |                            |                  |
|   | Number Street  City State Zip Code   | -<br>-<br>-                                |                       |                            |                  |
|   | Number Street  City State Zip Code Person's relationship to you  | -<br>-<br>-<br>-                           |                       |                            |                  |
|   | Number Street  City State Zip Code Person's relationship to you  Person Who Received Transfer  | -<br>-<br>-<br>-                           |                       |                            |                  |
|   | Number Street  City State Zip Code Person's relationship to you  Person Who Received Transfer  | -<br>-<br>-<br>-                           |                       |                            |                  |
|   | Number Street  City State Zip Code Person's relationship to you  Person Who Received Transfer  Number Street   | -<br>-<br>-<br>-                           |                       |                            |                  |
|   | Number Street  City State Zip Code Person's relationship to you  Person Who Received Transfer  Number Street  City State Zip Code  | -<br>-<br>-<br>-<br>-                      |                       |                            |                  |
|   | Number Street  City State Zip Code Person's relationship to you  Person Who Received Transfer  Number Street   | -<br>-<br>-<br>-                           |                       |                            |                  |
| , | Number Street  City State Zip Code Person's relationship to you  Person Who Received Transfer  Number Street  City State Zip Code Person's relationship to you   | you transfer any property to a self-settle | ed trust or similar o | device of which you ar     | e a beneficiary? |
|   | Number Street  City State Zip Code Person's relationship to you  Person Who Received Transfer  Number Street  City State Zip Code  | you transfer any property to a self-settle | ed trust or similar o | device of which you ar     | e a beneficiary? |
|   | Number Street  City State Zip Code Person's relationship to you  Person Who Received Transfer  Number Street  City State Zip Code Person's relationship to you  Within 10 years before you filed for bankruptcy, did These are often called asset-protection devices.)                               | you transfer any property to a self-settle | ed trust or similar o | device of which you ar     | e a beneficiary? |
|   | Number Street  City State Zip Code Person's relationship to you  Person Who Received Transfer  Number Street  City State Zip Code Person's relationship to you  Within 10 years before you filed for bankruptcy, did These are often called asset-protection devices.)                               | you transfer any property to a self-settle | ed trust or similar o | device of which you ar     | e a beneficiary? |
|   | Number Street  City State Zip Code Person's relationship to you  Person Who Received Transfer  Number Street  City State Zip Code Person's relationship to you  Within 10 years before you filed for bankruptcy, did These are often called asset-protection devices.)                               | you transfer any property to a self-settle | ed trust or similar o | device of which you ar     | e a beneficiary? |
|   | Number Street  City State Zip Code Person's relationship to you  Person Who Received Transfer  Number Street  City State Zip Code Person's relationship to you  Within 10 years before you filed for bankruptcy, did These are often called asset-protection devices.)                               | you transfer any property to a self-settle |                       | device of which you ar     | Date transfe     |
|   | Number Street  City State Zip Code Person's relationship to you  Person Who Received Transfer  Number Street  City State Zip Code Person's relationship to you  Within 10 years before you filed for bankruptcy, did These are often called asset-protection devices.)                               |  |                       | device of which you ar     |                  |
|   | Number Street  City State Zip Code Person's relationship to you  Person Who Received Transfer  Number Street  City State Zip Code Person's relationship to you  Within 10 years before you filed for bankruptcy, did These are often called asset-protection devices.)  No Yes. Fill in the details. |  |                       | device of which you ar     | Date transfe     |
|   | Number Street  City State Zip Code Person's relationship to you  Person Who Received Transfer  Number Street  City State Zip Code Person's relationship to you  Within 10 years before you filed for bankruptcy, did These are often called asset-protection devices.)                               |  |                       | device of which you ar     | Date transfe     |

Filed 08/02/16 Entered 08/02/16 06:32:48 Desc Main

Debtor 1 Clarence ase 16-24749 First Name Filed 08/02/16 Entered 08/02/16 06:32:48 Desc Main Doc 1

Documetht me

Page 46 of 69

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

| 20. | or tra | ansferred?  | gs, money ma   | rket, or other fina | ncial accounts     |                      |                    | in your name, or for y   |  |  |
|-----|--------|---|----------------|---------------------|--------------------|----------------------|--------------------|--|--|--|
|     |        | No<br>Yes. Fill in the deta                       | ils.           |                     |                    |                      |                    |  |  |  |
|     |        |   |                |                     | Last 4 d<br>number | igits of account     | Type of a instrume | eccount or<br>ent  | Date<br>account was<br>closed, sold,<br>moved, or<br>transferred | Last balance<br>before<br>closing or<br>transfer |
|     |        | Person Who Was                                    | Paid           |                     | - XXXX-            |                      | Chec               | _  |  |  |
|     |        | Number Street                                     |                |                     | -                  |                      |                    | ey market<br>erage<br>r  |  |  |
|     |        | City  | State          | Zip Code            | _                  |                      |                    |  |  |  |
|     |        | Person Who Was                                    | Paid           |                     | - XXXX-            |                      | Chec               | _  |  |  |
|     |        | Number Street                                     |                |                     | _                  |                      | Mone               | ey market<br>erage   |  |  |
|     |        |   |                |                     | =                  |                      | Othe               | =  |  |  |
|     |        | City  | State          | Zip Code            |                    |                      |                    |  |  |  |
| 21. | valu   | ou now have, or cables?  No Yes. Fill in the deta |                | within 1 year be    |                    | I for bankruptcy, an | y safe depos       | it box or other depositions of the content of the c |  | , cash, or other  Do you still                   |
|     |        |   |                |                     | WIIO CISC          | nau access to it:    |                    | Describe the conten  |  | have it?   |
|     |        | Name of Financia                                  | I Institution  |                     | Name               |                      |                    |  |  | ☐ No<br>☐ Yes                                    |
|     |        | Number Street                                     |                |                     | Number             | Street               |                    |  |  | 163  |
|     |        | City  | State          | Zip Code            | City               | State Z              | p Code             |  |  |  |
| 22. | Have   | e you stored prop                                 | erty in a stor | age unit or plac    | e other than       | your home within 1   | year before y      | ou filed for bankrupt  | cy?  |  |
|     |        | No<br>Yes. Fill in the deta                       | ils.           |                     |                    |                      |                    |  |  |  |
|     | _      |   |                |                     | Who else           | had access to it?    |                    | Describe the content   | nts  | Do you still have it?                            |
|     |        | Name of Storage                                   | Facility       |                     | Name               |                      |                    |  |  | ☐ No ☐ Yes                                       |
|     |        | Number Street                                     |                |                     |                    | Street               |                    |  |  |  |
|     |        | City  | State          | Zin Codo            | City               | State Zi             | p Code             |  |  |  |
|     |        | City  | State          | Zip Code            |                    |                      |                    |  |  |  |

| Debtor ' | First Name Middle Name   | Document Page 47 of 69                          | 12/11.6 /06:32:48 Desc Mai                | <u>n</u>        |
|----------|--|---|---|-----------------|
| Part 9:  | Identify Property You Hold or Contro   | ol for Someone Else                             |   |                 |
| 23. Do   | you hold or control any property that someor   | ne else owns? Include any property you borro    | wed from, are storing for, or hold in tru | st for someone. |
| <u>~</u> | No Yes. Fill in the details.   |   |   |                 |
| _        | res. I ill ill ule details.  | Where is the property?                          | Describe the contents                     | Value           |
|          | Owner's Name   | Number Street                                   |   |                 |
|          | Owner's Name   | Number Street                                   |   |                 |
|          | Number Street  |   |   |                 |
|          |  | City State Zip Code                             |   |                 |
|          | City State Zip Code  |   |   |                 |
| Part 10  | Give Details About Environmental I   | nformation                                      |   |                 |
| For the  | purpose of Part 10, the following definitions apply:   |   |   |                 |
|          | Environmental law means any federal, state, or local   |   |   |                 |
|          | hazardous or toxic substances, wastes, or material<br>including statutes or regulations controlling the clea |   | , or other medium,                        |                 |
| •        | Site means any location, facility, or property as defin  | ed under any environmental law, whether you now | own, operate, or utilize it               |                 |
|          | or used to own, operate, or utilize it, including dispe  |   |   |                 |
|          | Hazardous material means anything an environmer<br>toxic substance, hazardous material, pollutant, con       |   | substance,                                |                 |
|          | all notices, releases, and proceedings that you kno  |   |   |                 |
|          |  |   |   |                 |
| 24. Ha   | s any governmental unit notified you that you  | may be liable or potentially liable under or in | violation of an environmental law?        |                 |
| ľ        | No Yes. Fill in the details.   |   |   |                 |
|          | •  | Governmental unit                               | Environmental law, if you know it         | Date of         |
|          |  |   |   | notice          |
|          | Name of site   | Governmental unit                               |   |                 |
|          | Number Street  | Number Street                                   |   |                 |
|          |  | City State Zip Code                             |   |                 |
|          | City State Zip Code  |   |   |                 |
| 25 U-    | ve you notified any governmental unit of any r   | please of hazardous material?                   |   |                 |
| 23. Na   | •  | elease of flazardous filaterial?                |   |                 |
|          | No Yes. Fill in the details.   |   |   |                 |
|          | -  | Governmental unit                               | Environmental law, if you know it         | Date of notice  |
|          |  |   |   | nouce           |
|          | Name of site   | Governmental unit                               |   |                 |
|          | Number Street  | Number Street                                   |   |                 |
|          |  | City State Zip Code                             |   |                 |
|          | City State Zip Code  |   |   |                 |
|          |  |   | L.  |                 |

| Debt | tor 1    | Claren                         | -24749         | Doc 1<br>Middle Name | Filed 08/02/16 Document                      | Entered 08/0<br>Page 48 of 69 |            | &i∙32: <u>48</u> | Desc Mai                             | <u>n</u>      |
|------|----------|--------------------------------|----------------|----------------------|--|-------------------------------|------------|------------------|--------------------------------------|---------------|
| 26.  | Hav      | e you been a party i           | n any judicia  | l or administra      | ative proceeding under                       | any environmental la          | w? Include | esettlements     | and orders.                          |               |
|      | <b>✓</b> | No<br>Yes. Fill in the details |                |                      |  |                               |            |                  |                                      |               |
|      | ш        | res. I ill ill the details     |                |                      | Court or agency                              |                               | Nature of  | f the case       |                                      | Status of the |
|      |          | Case title                     |                |                      |  |                               |            |                  |                                      | Case          |
|      |          |                                |                |                      | Court Name                                   |                               |            |                  |                                      | On appeal     |
|      |          | Case number                    |                |                      | Number Street                                |                               |            |                  |                                      | Concluded     |
|      |          |                                |                |                      | City State                                   | Zip Code                      |            |                  |                                      |               |
| Part | 11:      | Give Details Ab                | out Your E     | Business or          | Connections to A                             | ny Business                   |            |                  |                                      |               |
| 27.  | With     | nin 4 years before yo          | ou filed for b | ankruptcy, did       | l you own a business o                       | r have any of the follo       | wing conn  | ections to an    | y business?                          |               |
|      |          |                                |                | -                    | profession, or other activ                   |                               | art-time   |                  |                                      |               |
|      |          | A member of a l                | •              | company (LLC         | c) or limited liability partne               | ersnip (LLP)                  |            |                  |                                      |               |
|      |          | An officer, direct             | •              | •                    | a corporation<br>ty securities of a corporat | ion                           |            |                  |                                      |               |
|      | <b>☑</b> | No. None of the above          |                |                      | y securines of a corporat                    | OH                            |            |                  |                                      |               |
|      |          |                                |                |                      | ls below for each busines                    | S.                            |            |                  |                                      |               |
|      |          |                                |                |                      | Describe the n                               | ature of the business         |            |                  | lentification nu<br>ial Security nun |               |
|      |          | Business Name                  |                |                      |  |                               |            | EIN:             |                                      |               |
|      |          | Number Street                  |                |                      | Name of accou                                | ıntant or bookkeeper          |            | Dates busin      | ess existed                          |               |
|      |          | City                           | State          | Zip Code             | - Name of accou                              | intant of bookkeeper          |            | From             | To                                   |               |
|      |          |                                |                |                      |  |                               |            |                  |                                      |               |
|      |          |                                |                |                      | Describe the n                               | ature of the business         |            |                  | lentification nu<br>ial Security nun |               |
|      |          | Business Name                  |                |                      |  |                               |            | EIN:             |                                      |               |
|      |          | Number Street                  |                |                      | Name of accou                                | ıntant or bookkeeper          |            | Dates busin      | ess existed                          |               |
|      |          | City                           | State          | Zip Code             |  |                               |            | From             | To                                   |               |
|      |          |                                |                |                      |  |                               |            |                  |                                      |               |
|      |          |                                |                |                      | Describe the n                               | ature of the business         |            |                  | lentification nu<br>ial Security nun |               |
|      |          | Business Name                  |                |                      |  |                               |            | EIN:             |                                      |               |
|      |          |                                |                |                      |  |                               |            | Dates busin      | ess existed                          |               |
|      |          | Number Street                  |                |                      | Name of accou                                | ıntant or bookkeeper          |            |                  |                                      |               |
|      |          | City                           | State          | Zip Code             |  |                               |            | From             | To                                   |               |
|      |          |                                |                |                      |  |                               |            |                  |                                      |               |

| 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.    No   | Debto   | r 1        | Clarence a                   | <u>se 16-24749</u>                       |                                       |             | 0816216               | Ente        | <u>ered</u>  | Desc Main                         |
|--|---------|------------|------------------------------|--|---------------------------------------|-------------|-----------------------|-------------|--|-----------------------------------|
| Creditors, or other parties.    No   |         |            | First Name                   |  | Middle Name                           | Doc         | :umetht <sup>me</sup> | Page        | 49 of 69   |                                   |
| Ves. Fill in the details below.   Date issued     Name     MM/DD/YYYY  |         | cred       | litors, or oth               | •  | r bankruptcy, di                      | d you giv   | e a financial st      | atement     | to anyone about your business? In  | clude all financial institutions, |
| Date issued    Name  | Ė       |            |                              | e details below.                         |                                       |             |                       |             |  |                                   |
| Number Street  City State Zip Code  Part 12: Sign Below  I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.     Signature of Debtor 1   Signature of Debtor 2             |         | _          |                              |  |                                       |             | Date issued           |             |  |                                   |
| City State Zip Code  Part 12: Sign Below  I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.     ** /s/ Clarence Robinson   Signature of Debtor 1   Signature of Debtor 2 |         |            | Name                         |  |                                       |             | MM/DD/YYYY            |             |  |                                   |
| I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  |         |            | Number                       | Street                                   |                                       |             |                       |             |  |                                   |
| I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.     Signature of Debtor 1  |         |            | City                         | State                                    | Zip Code                              | <u>е</u>    |                       |             |  |                                   |
| I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.     Signature of Debtor 1  | Don't 4 | 0-         | einn Bal                     |  |                                       |             |                       |             |  |                                   |
| Date 8/2/2016  Date 8/2/2016  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?  No Yes. Name of person  Attach the Bankruptcy Petition Preparer's Notice,  | ar      | nd c       | orrect. I und<br>ruptcy case | derstand that mak<br>can result in fines | ing a false state<br>up to \$250,000, | ement, co   | ncealing prop         | erty, or ol | otaining money or property by fraudining money or property by fraudins, or both. 18 U.S.C. §§ 152, 1341, | d in connection with a            |
| Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  ✓ No  ── Yes  Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?  ✓ No  ── Yes. Name of person  Attach the Bankruptcy Petition Preparer's Notice,  |         |            |                              | Signature of Debto                       | r 1                                   |             |                       |             | Signature of Debtor 2  |                                   |
| ✓ No   |         |            |                              | Date 8/2/2016                            |                                       |             |                       |             | Date 8/2/2016  |                                   |
| ✓ No  Yes. Name of person  Attach the Bankruptcy Petition Preparer's Notice,   | Di      | <u> </u>   | No                           | dditional pages to                       | Your Statemen                         | nt of Finar | ncial Affairs fo      | r Individu  | als Filing for Bankruptcy (Official I  | Form 107)?                        |
| Yes. Name of person  Attach the Bankruptcy Petition Preparer's Notice,   | Di      | id y       | ou pay or a                  | gree to pay someo                        | ne who is not a                       | n attorne   | y to help you f       | ill out bar | kruptcy forms?   |                                   |
|  | ~       | <b>7</b> N | No                           |  |                                       |             |                       |             |  |                                   |
|  |         | □ `        | Yes. Name o                  | f person                                 |                                       |             |                       |             |  | •                                 |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

|   | \$245 | filing fee         |
|---|-------|--------------------|
|   | \$75  | administrative fee |
| + | \$15  | trustee surcharge  |
|   | \$335 | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- domestic support and property settlement obligations;

### Case 16-24749 Doc 1 Filed 08/02/16 Document

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

Entered 08/02/16 06:32:48 Desc Main Page 51 of 69

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

|   | \$1,167              | filing fee |
|---|----------------------|------------|
| + | \$550 administrative |            |
|   | \$1,717              | total fee  |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$275 | total fee          |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$200 | filing fee         |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

## Chapter 13: Repayment plan for individuals with regular income

|   | \$310 | total fee          |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$235 | filing fee         |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

## Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

## Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

## RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/15)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.

- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

## C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
  - Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate

tasks and functions for the attorney amd support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.

- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$400.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$ 310.00
- 3. Before signing this agreement, the attorney has received, \$ 500.00 toward the flat fee, leaving a balance due of \$ 3500.00 ; and \$ 84.50 for expenses, leaving a balance due for the filing fee of \$ 310.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: 08/01/16        |                            |
|-----------------------|----------------------------|
| Signed:               |                            |
|                       |                            |
| /s/ Clarence Robinson | /s/Brenda Ann Likavec      |
| Debtor(s)             | Attorney for the Debtor(s) |

Do not sign this agreement if the amounts are blank.

00/01/11

Case 16-24749 Doc 1 Filed 08/02/16 Entered 08/02/16 06:32:48 Desc Main Document Page 60 of 69

B 203 (12/94)

#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

| In re | Clarence Robinson; Gloria F   | Robinson                                  | Case No.   |                                |
|-------|---|---|--|--------------------------------|
| _     | Debtor  |   |  | (If known)                     |
|       |   |   | Chapter  | Chapter 13                     |
|       | DISCLOSURE O  | F COMPENSATION                            | ON OF ATTORNEY FO  | R DEBTOR                       |
| 1.    | compensation paid to me within o  | ne year before the filing of t            | certify that I am the attorney for the he petition in bankruptcy, or agreed implation of or in connection with the | to be paid to me, for services |
|       | For legal services, I have agreed   | to accept                                 |  | \$4,000.0                      |
|       | Prior to the filing of this statemen  | t I have received                         |  | \$500.0                        |
|       | Balance Due   |   |  | \$3,500.0                      |
| 2.    | The source of the compensation p  | aid to me was:                            |  |                                |
|       | <b>✓</b> Debtor   | Other (specif                             | y)   |                                |
| 3.    | The source of the compensation p  | aid to me is:                             |  |                                |
|       | <b>✓</b> Debtor   | Other (specif                             | y)   |                                |
| 4.    | I have not agreed to share the members and associates of r                  | e above-disclosed compens<br>ny law firm. | ation with any other person unless th  | ney are                        |
|       |   | law firm. A copy of the agi               | n with a other person or persons who reement, together with a list of the n  |                                |
| 5.    |   | _   | r legal service for all aspects of the bing advice to the debtor in determining                                    |                                |
|       | b. Preparation and filing of ar   | ny petition, schedules, state             | ments of affairs and plan which may  | be required;                   |
|       | c. Representation of the debt   | or at the meeting of creditor             | s and confirmation hearing, and any  | adjourned hearings thereof;    |
|       | d. Representation of the debt   | or in adversary proceedings               | s and other contested bankruptcy ma  | atters;                        |
| 6.    | By agreement with the debtor(s),  | the above-disclosed fee doe               | es not include the following services:   |                                |
|       |   |   |  |                                |
|       |   | CERTIF                                    | ICATION  |                                |
|       | certify that the foregoing is a com<br>debtor(s) in this bankruptcy proceed |   | ement or arrangement for payment   | to me for representation of    |
|       | 8/2/2016  |   |  |                                |
|       | Date  |   | Signature of Attorney  |                                |
|       |   |   | Semrad Law Firm  |                                |
|       |   |   | Name of law firm   |                                |

# Case 16-24749 Doc 1 Filed 08/02/16 Entered 08/02/16 06:32:48 Desc Main UNITED STATES BANKBURTCY COURT Northern District of Illinois

| In re: | Robinson, Clarence ; Robinson, Gloria | Case No                                       |   |
|--------|---------------------------------------|---|---|
|        | Debtor(s)                             |   |   |
|        |                                       | Chapter                                       | Chapter13                                 |
|        | VERIF                                 | CICATION OF CREDITOR MAT                      | RIX                                       |
|        | The above named Debtors hereby verify | that the attached list of creditors is true a | nd correct to the best of their knowledge |
|        |                                       |   |   |
| Date:  | 8/2/2016                              | /s/ Robinson, Clare                           | ence                                      |
|        |                                       | Robinson, Clarenc<br>Signature of Debto       |   |
|        |                                       | /s/ Pohinson, Glari                           |   |

Robinson, Gloria Signature of Joint Debtor JARED-GALLERIA OF JWLR PO Box 3680 Akron , OH 44309 USA

NATIONSTAR MORTGAGE LL 350 HIGHLAND DR LEWISVILLE , TX 75067 USA

CAPITAL ONE AUTO FINANCE 3901 DALLAS PKWY PLANO , TX 75093 USA

Bristol Bay Townhome Association 128 S County Farm Road c/o Keay and Costello Wheaton , IL 60187 USA

PERSONAL FINANCE CO 17507 SOUTH KEDZIE HAZEL CREST , IL 60429 USA

IRS 1 PO Box 7346 Philadelphia , PA 19101 USA

Americash C/O Bankruptcy Department 179 W Van Buren St C/O Bankruptcy Department Chicago , IL 60605 USA

Vanda LLCc/co Weinnstein and Riley, P.S 2001 Western Ave Ste 400 Seattle , WA 98121 USA

Portfolio Recovery PO Box 41067 Attn: Carol E. Hardy Norfolk , VA 23541 USA

MERRICK BANK CORP PO Box 10368 c/o Susan Gaines Greenville, SC 29603 LISA

Nicor Advanced Energy PO Box 0632 Aurora , IL 60507 USA

WORLD ACCEPTANCE CORP PO Box 6429 Greenville , SC 29606 USA Case 16-24749 Doc 1 Filed 08/02/16 Entered 08/02/16 06:32:48 Desc Main Document Page 64 of 69

IRS 1 PO Box 7346 Philadelphia , PA 19101 USA

| Debtor 1 Clarence ase 16-2  | 24749 Doc 1 Filed 08/2<br>Docume<br>estions for Reporting Purposes   |   | 5.32:4 <del>8 Desc Main</del>   |
|---|--|---|---|
| 16. What kind of debts do you have?   | 16a. Are your debts primarily as "incurred by an individu No. Go to line 16b. Yes. Go to line 17.  16b. Are your debts primarily obtain money for a busines investment. No. Go to line 16c. Yes. Go to line 17.  | consumer debts? Consumer debts all primarily for a personal, family, of business debts? Business debts as or investment or through the open under the debts are not consumer debts.   | or household purpose."  are debts that you incurred to eration of the business or   |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | paid that funds will be availab  No.  Yes.   |   | is excluded and administrative expenses are   |
| 18. How many creditors do you estimate that you owe?  | ✓ 1-49<br>☐ 50-99<br>☐ 100-199<br>☐ 200-999  | ☐ 1,000-5,000<br>☐ 5,001-10,000<br>☐ 10,001-25,000  | 25,001-50,000 50,001-100,000 More than 100,000  |
| 19. How much do you estimate your assets to be worth?   | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million   | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million   | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion                                   |
| 20. How much do you<br>estimate your<br>liabilities to be?  | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million   | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million   | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion                                   |
| Part 7: Sign Below  For you   | and correct.  If I have chosen to file under Chor 13 of title 11, United States Correced under Chapter 7.  If no attorney represents me an fill out this document, I have obtout the comment of the correction with a bankruptcy can both. 18 U.S.C. §§ 152, 1341  /s/ Clarence Robinson Signature of Debtor 1  Executed on 8/1/2016 | hapter 7, I am aware that I may proceed and I did not pay or agree to pay some tained and read the notice required ith the chapter of title 11, United Statement, concealing property, or obtained and result in fines up to \$250,0 1519, and \$571. | ates Code, specified in this petition.  raining money or property by fraud in 00, or imprisonment for up to 20 years,  re of Debtor 2  ted on |
|   | MM / DD /  | YYYY  | MM / DD / YYYY  |

| Fill in th | is information to identify your case | 9 Doc 1 Filed 08               | /02/16 Entered                             | d 08/02/16 06:32:48                             | Desc Main                                    |
|------------|--------------------------------------|--------------------------------|--|---|--|
| Debtor     | 1 Clarence                           | Boodin                         | Robinson                                   |   |  |
|            | First Name                           | Middle Name                    | Last Name                                  |   |  |
| Debtor:    | 2<br>e, if filing) First Name        | Middle Name                    | Last Name                                  |   |  |
|            |                                      |                                |  |   |  |
| United S   | States Bankruptcy Court for the:     | Northern                       | District of Illinois (State)               |   |  |
| Case nu    |                                      |                                | (0.0.0)                                    |   |  |
| (If know   | n)                                   |                                |  |   | Check if this is a                           |
| Offic      | cial Form 106De                      | C                              |  |   | amended filing                               |
| Decl       | aration About a                      | _<br>n Individual De∣          | btor's Sched                               | ules  | 12/1:  |
| If two ma  | arried people are filing togeth      | er, both are equally responsib | ole for supplying correct                  | t information.                                  |  |
| You mus    | st file this form whenever you       | file bankruptcy schedules or   | amended schedules. Ma                      | iking a false statement, concea                 | ling property, or obtaining money or         |
| property   | by fraud in connection with a        |                                |  |   | ars, or both. 18 U.S.C. §§ 152, 1341,        |
| 1519, and  | a 35/1.                              |                                |  |   |  |
| Part 1:    | Sign Below                           |                                |  |   |  |
| Dic        | d you pay or agree to pay some       | eone who is NOT an attorney    | to help you fill out bank                  | ruptcy forms?                                   |  |
|            |                                      |                                |  |   |  |
|            | No                                   |                                | Fig. 4/12 F                                |   |  |
| Ш          | Yes. Name of person                  |                                | _ Attach Bankruptcy<br>Signature (Official | Petition Preparer's Notice, Decla<br>Form 119). | ration, and                                  |
|            |                                      |                                |  | en et en secundarion y                          |  |
|            |                                      |                                |  |   |  |
|            |                                      |                                |  |   |  |
| Un         | der penalty of perjury, I declar     | e that I have read the summar  | v and schedules filed w                    | ith this declaration and                        |  |
|            | t they are true and correct.         | 2/                             |  | and the decided and the                         |  |
| X Isl      | Clarence Robinson                    | launte d                       | benx                                       |   |  |
| Sign       | nature of Debtor 1                   |                                | Signatu                                    | re of Debtor 2                                  | <u>,                                    </u> |
| Dat        | e 8/1/2016                           |                                | Date _                                     |   |  |
|            | MM/DD/YYYY                           |                                | N  | MM/DD/YYYY                                      |  |

| Deb | tor 1 Clarence asc 16-24749 Made Name Filed               | 08/03/16 Entered 08/02/16 06:32:48 Desc Main   |
|-----|---|--|
| 28. |   | cument Page 67 of 69 ve a financial statement to anyone about your business? Include all financial institutions,   |
|     | No Yes. Fill in the details below.                        |  |
|     |   | Date issued  |
|     | Name  | MM/DD/YYYY   |
|     | Number Street   |  |
|     | City State Zip Code                                       |  |
| Par | t12: Sign Below   |  |
|     | and correct. Lunderstand that making a false statement, c | airs and any attachments, and I declare under penalty of perjury that the answers are true oncealing property, or obtaining money or property by fraud in connection with a isonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  Signature of Debtor 2 |
|     | Date 8/1/2016   | Date 8/1/2016  |
|     | Did you attach additional pages to Your Statement of Fina | ncial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?   |
|     | ✓ No  Yes   |  |
|     | Did you pay or agree to pay someone who is not an attorn  | ey to help you fill out bankruptcy forms?  |
|     | ☑ No  |  |
|     | Yes. Name of person                                       | Attach the Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119).   |

## Case 16-24749 Doc 1 UNTITED 98/07/16 BANTATORED 98/07/16 06:32:48 Desc Main Document Districted 98/07/16 06:32:48

| In re: | Robinson, Clarence ; Robinson, Gloria          | Case No   |
|--------|--|---|
| -      | Debtor(s)                                      |   |
|        |  | Chapter. Chapter13  |
|        | VERIFICAT                                      | TION OF CREDITOR MATRIX   |
|        | The above named Debtors hereby verify that the | he attached list of creditors is true and correct to the best of their knowledge. |
| Date:  | 8/1/2016                                       | /s/ Robinson, Clarence Robinson, Clarence Signature of Debtor                     |
|        |  | /s/ Robinson, Gloria Robinson, Gloria Signature of Joint Debtor                   |

| Debt | tor 1 | Clarence ase 16-24749 First Name  | Middle Name        | Filed 08/02/16                        | Entered 08/02/16 06:32:48   | Desc Main           |                 |
|------|-------|---|--------------------|---------------------------------------|---|---------------------|-----------------|
| 16.  | Cal   | culate the median family income   | e that applies     | Document<br>to you. Follow these step | Page 69 of 69   |                     |                 |
|      |       | . Fill in the state in which you live.                                    |                    | Illinois                              |   |                     |                 |
|      |       | . Fill in the number of people in yo                                      | ur household.      | 2                                     |   |                     |                 |
|      |       | . Fill in the median family income f                                      |                    | and size of household                 |   |                     | \$63,896.00     |
|      | 100.  | 20  | n income amo       | unts, go online using the l           | ink specified in the separate instructions for this   | form. This list may |                 |
| 17.  | Hov   | w do the lines compare?   |                    |                                       |   |                     |                 |
|      | 17a   |   |                    |                                       | s form, check box 1, <i>Disposable income is not de</i><br>hisposable Income (Official Form 122C-2).  | etermined under 11  |                 |
|      | 17b   |   | nd fill out Cal    | culation of Disposable                | ck box 2, <i>Disposable income is determined unde</i> Income (Official Form 122C-2). On line 39 of    |                     |                 |
| Part | 3:    | Calculate Your Commitme   | nt Period          | Under 11 U.S.C. §1                    | 325(b)(4)   |                     |                 |
| 18.  | Cop   | by your total average monthly in  | come from li       | ne 11.                                |   |                     | \$1,287.00      |
| 19.  |       |   |                    |                                       | e is not filing with you, and you contend that cald<br>our spouse's income, copy the amount from line |                     |                 |
|      | 19a   | . If the marital adjustment does not                                      | t apply, fill in 0 | on line 19a.                          |   |                     | - <u>\$0.00</u> |
|      | 19b   | . Subtract line 19a from line 18.   |                    |                                       |   |                     | \$1,287.00      |
| 20.  | Cal   | culate your current monthly inco  | ome for the y      | ear. Follow these steps:              |   |                     |                 |
|      | 20a   | . Copy line 19b.  |                    |                                       |   |                     | \$1,287.00      |
|      |       | Multiply by 12 (the number of mo  | nths in a year)    | •                                     |   |                     | x 12            |
|      | 20b   | . The result is your current monthly                                      | y income for th    | ne year for this part of the t        | form.   |                     | \$15,444.00     |
|      | 20c   | . Copy the median family income f   | or your state a    | nd size of household from             | line 16c.   |                     | \$63,896.00     |
| 21.  | Hov   | w do the lines compare?   |                    |                                       |   |                     |                 |
|      | V     | Line 20b is less than line 20c. Unle period is 3 years. Go to Part 4.     | ess otherwise      | ordered by the court, on th           | e top of page 1 of this form, check box 3, The co   | ommitment           |                 |
|      |       | Line 20b is more than or equal to I commitment period is 5 years. Go      |                    | s otherwise ordered by the            | e court, on the top of page 1 of this form, check   | box 4, The          |                 |
| Part | 4:    | Sign Below  |                    |                                       |   |                     |                 |
|      |       | By signing here, I declare under p  | enalty of perju    | ry that the information on            | this statement and in any attachments is true ar  | nd correct.         |                 |
|      |       | /s/ Clarence Robinson Signature of Debtor 1                               | Ha                 | em So                                 | Signature of Debtor 2   |                     |                 |
|      |       | Date 8/1/2016<br>MM/DD/YYYY   |                    |                                       | Date MM/DD/YYYY   |                     |                 |
|      |       | If you checked 17a, do NOT fill ou<br>If you checked 17b, fill out Form 1 |                    |                                       | 9 of that form, copy your current monthly income  | from line 14 above. |                 |